

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90101 049 ***150.00

DOCUMENT # P00000073967

1. Entity Name

STATION INDUSTRIES, INC.

Principal Place of Business

800 SOUTHWEST 85TH AVENUE
OCALA FL 34482

Mailing Address

800 SOUTHWEST 85TH AVENUE
OCALA FL 34482

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. BOX 1800

Suite, Apt. #, etc.

City & State

COTUIT MA

Zip

02635

Country

USA

4. FEI Number

06-1594092

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DOZIER, SHEPPARD W
9 NORTHEAST FIRST AVENUE
OCALA FL 34470

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME ROSBECK, EDWARD R
STREET ADDRESS 800 SOUTHWEST 85TH AVENUE
CITY-ST-ZIP Ocala FL 34482

☐ Delete

TITLE D/P
NAME EDWARD V. ROSBECK
STREET ADDRESS 169 BLVD. BOX 1472
CITY-ST-ZIP EDGARTOWN, MA 02539

☒ Change ☐ Addition

TITLE T/S
NAME ROBERT L. KEIM
STREET ADDRESS 190 CLAMSHELL COVE RD.
CITY-ST-ZIP COTUIT, MA 02635

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition

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CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Robert L. Keim ROBERT L. KEIM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SECRETARY
TREASURER

4/17/01 (508) 420-2300

Date

Daytime Phone #

CR2E034 (10/00)