

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2002 8:00 am
Secretary of State

01-29-2002 90008 016 ***150.00

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DOCUMENT # P00000081669

1. Entity Name
WESLEY SANITATION INC.

Principal Place of Business
6140 S.E. 71ST PLACE
TRENTON FL 32693

Mailing Address
6140 S.E. 71ST. PLACE
TRENTON FL 32693

2. Principal Place of Business
6140 S.E. 71st Place
 Suite, Apt. #, etc.

3. Mailing Address
6140 S.E. 71st. Place
 Suite, Apt. #, etc.

City & State
Trenton FL

City & State
Trenton, FL

Zip
32693

Country
Gilchrist

Zip
32693

Country
Gilchrist

4. FEI Number **59-3673591**

Applied For
 Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

WESLEY, VERNON D
7191 SE 85TH TRAIL
TRENTON FL 32693

7. Name and Address of New Registered Agent

Name
John R. Wesley

Street Address (P.O. Box Number is Not Acceptable)
6140 S.E. 71st Place

City
Trenton

FL Zip Code
32693

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 **Vernon Dale Wesley** **1/14/02**
 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, 2002 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

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P. WESLEY, VERNON D 6140 S.E. 71ST. PLACE TRENTON FL 32693 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CS BUSSARD, HOLLY W 4991 N.W. 155TH ST. TRENTON FL 32693 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T WESLEY, JOHN R 6140 S.E. 71ST PLACE TRENTON FL 32693 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | President Wesley, John, R. 6140 S.E. 71st Place Trenton FL 32693 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> 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: **John R. Wesley** **1/14/02** **352-463-6122**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)