**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

m mino

(PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Feb 05, 2002 8:00 am DOCUMENT # P00000100344 **Secretary of State** 1. Entity Name 02-05-2002 90026 011 \*\*\*150.00 BAILEY'S EQUIPMENT COMPANY, INC. Principal Place of Business Mailing Address 19872 SR 20W 19872 SR 20W SUITE 3 SUITE 3 **BLOUNTSTOWN FL 32424 BLOUNTSTOWN FL 32424** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3678581 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent \_BAILEY, ARTHUR SR Street Address (P.O. Box Number is Not Acceptable) 19572 SR 71N **BLOUNTSTOWN FL 32424** City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE Addition PRES NAME NAME BAILEY, ARTHUR STREET ADDRESS STREET ADDRESS 19572 SR 71N CITY-ST-ZIP CITY-ST-ZIP **BLOUNTSTOWN FL 32424** ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME BAILEY, ARTHUR JR STREET ADDRESS STREET ADDRESS 16302 NW WILLARD SMITH RD CITY-ST-ZIP CITY-ST-ZIP BLOUNTSTOWN FL 32424 Change TITLE ☐ Delete TITLE ☐ Addition MCCORMICK, WINDY. NAME MCCORMICK, WINDY 19572 SR 71N STREET ADDRESS STREET ADDRESS 23382 NW MURDOCK CITY-ST-ZIP CITY-ST-ZIP BLOUNTSTOWN, FL 32424 ALTHA FL 32421 ☐ Addition TITLE ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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

Windy, McCormick

(850) 674-4256

01/18/02