

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90026 027 ***150.00

DOCUMENT # P00000117780

1. Entity Name
AROOSTOCK ENTERPRISES INC.

Principal Place of Business

P.O. BOX 7451
BRECKENRIDGE CO 84024

Mailing Address

P.O. BOX 7451
BRECKENRIDGE CO 84024

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 84-1435436

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

ROESSEL, LAWRENCE E
164 PALMETTO AVE
FLAGLER BCH FL 32136

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 PD ☐ Delete
NAME ROESSEL, LAWRENCE E
STREET ADDRESS P.O. BOX 7451
CITY-ST-ZIP BRECKENRIDGE CO 84024

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lawrence E Roessel 9/5/02 9704532519

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

871674

#P00000117780

9/5/2002

Uniform Business Report

Division of Corporations

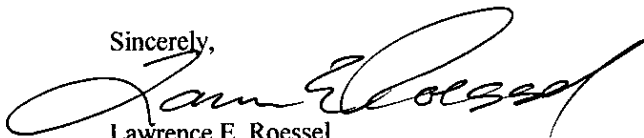
PO Box 1500

Tallahassee, FL 32302-1500

Greetings;

Enclosed you will find my Uniform Business Report. This is the late version. I did not receive the first form. We are out of state and the mail is frequently forwarded back and forth. The corporation is just myself as a tile setter and I have not started work in Florida as of this filing. I keep every thing active in case I do start. Enclosed is \$150.00 as my fee for the report.

Sincerely,



Lawrence E. Roessel

P.O. Box 7451

Breckenridge, CO 80424

FEI #84-1435436