

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000000206

1. Entity Name  
OUTSIDE AIR SOLUTIONS, INC.

Principal Place of Business  
1255 BELLE AVE. UNIT 111  
WINTER SPRINGS FL 32708

Mailing Address  
1255 BELLE AVE. UNIT 111  
WINTER SPRINGS FL 32708

2. Principal Place of Business  
4415 Parkbreeze Ct  
Suite, Apt. #, etc.

3. Mailing Address  
4415 Parkbreeze Ct  
Suite, Apt. #, etc.

City & State  
Orlando, FL

City & State  
Orlando, FL

4. FEI Number 59-3689168

Applied For  
Not Applicable

Zip 32808 Country Orange

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

## 6. Name and Address of Current Registered Agent

COOK, ALBERT R  
5250 SO. U.S. HWY 17-92  
CASSELBERRY FL 32707

## 7. Name and Address of New Registered Agent

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 \_\_\_\_\_ (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 P  
NAME CAYCE, JAMES L  
STREET ADDRESS 604 RIVERPARK CIR  
CITY-ST-ZIP LONGWOOD FL 32779 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VICE President ☒ Change ☐ Addition  
NAME Cayce, James L  
STREET ADDRESS 601 Spinnaker Way  
CITY-ST-ZIP LAKE MARY, FL 32746

TITLE President ☐ Change ☒ Addition  
NAME Gregory K Brooks  
STREET ADDRESS 6800 LUNAR LANE  
CITY-ST-ZIP Orlando, FL 32812

TITLE Vice-President ☐ Change ☒ Addition  
NAME Theodore H Brooks  
STREET ADDRESS 2995 Peterson Rd  
CITY-ST-ZIP Apopka, FL 32703

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

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

TITLE  
NAME  
STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR James S. Cayce 5/28/02 321-281-0340

Date Daytime Phone #

FILED  
Jun 02, 2002 8:00 am  
Secretary of State

05-15-2002 90039 011 \*\*\*150.00

DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)