

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000006046

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: AAA SUPERIOR MACHINING, INC.

Current Principal Place of Business:

8464 S.W. 65TH AVENUE ROAD
OCALA, FL 34476

New Principal Place of Business:

1400 DD COMMERCE BLVD.
SARASOTA, FL 34243

Current Mailing Address:

8464 S.W. 65TH AVENUE ROAD
OCALA, FL 34476

New Mailing Address:

1400 DD COMMERCE BLVD.
SARASOTA, FL 34243

FEI Number: 65-1067935

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIDGETT, DAVID E
230 N.E. 25TH AVENUE
OCALA, FL 34470 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HELLESVIG-WILLIAMS, MARY KAY
Address: 8464 S.W. 65TH AVENUE ROAD
City-St-Zip: OCALA, FL 34476

Title: D () Delete
Name: WILLIAMS, ROBERT G
Address: 8464 S.W. 65TH AVENUE ROAD
City-St-Zip: OCALA, FL 34476

Title: D () Delete
Name: PABST, KAREN S
Address: 8464 S.W. 65TH AVENUE ROAD
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HELLESVIG-WILLIAMS, MARY K
Address: 4372 ARROW AVE.
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Change () Addition
Name: WILLIAMS, ROBERT G
Address: 4372 ARROW AVE.
City-St-Zip: SARASOTA, FL 34232

Title: D (X) Change () Addition
Name: PABST, KAREN S
Address: 2825 SOUTHGATE LOOP
City-St-Zip: SEDALIA, MO 65301

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT GUY WILLIAMS

VP

04/30/2002

Electronic Signature of Signing Officer or Director

Date