

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90056 040 ***150.00

0004732 AT

DOCUMENT # P01000115572

1. Entity Name
TILO, INC.

Principal Place of Business

**662 WIMBROW DR.
 SEBASTIAN FL 32958**

Mailing Address

**662 WIMBROW DR.
 SEBASTIAN FL 32958**

2. Principal Place of Business

701 Lake Dr
 Suite, Apt. #, etc.

3. Mailing Address

701 Lake Dr
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Sebastian FL

City & State

Sebastian FL

4. FEI Number

59-3758423

Applied For

Not Applicable

Zip

Country

32958

Zip

Country

32958

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**STURSBURG, JOSEPH
 662 WIMBROW DR.
 SEBASTIAN FL 32958**

7. Name and Address of New Registered Agent

Name

John D. Newman

Street Address (P.O. Box Number is Not Acceptable)

701 Lake Dr

City

Sebastian

FL

Zip Code

32958

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

John D. Newman

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/02

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 **D** ☒ Delete
 NAME **STURSBURG, JOSEPH**
 STREET ADDRESS **662 WIMBROW DR.**
 CITY-ST-ZIP **SEBASTIAN FL 32958**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☐ Change ☒ Addition
 NAME **John D Newman**
 STREET ADDRESS **701 Lake Drive**
 CITY-ST-ZIP **Sebastian, FL 32958**

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

TITLE ☐ Change ☐ Addition
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 NAME
 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:

John D. Newman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02

Date

772-473-1131

Daytime Phone #

CR2E034 (9/01)