

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000059218

FILED
Jan 06, 2003
Secretary of State

Entity Name: DE-COMP RESIN-TECH, INC.

Current Principal Place of Business:

2541 W DUNNELLON RD
DUNNELLON, FL 34434

New Principal Place of Business:

Current Mailing Address:

2541 W DUNNELLON RD
DUNNELLON, FL 34434

New Mailing Address:

FEI Number: 01-0714421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEMER, ROBERT A
8585 SW HWY 200 STE 9
OCALA, FL 34481 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DESENA, MARY
Address: 6333 SW STATE RD 200
City-St-Zip: OCALA, FL 34476

Title: D () Delete
Name: DESENA, FRANK
Address: 6333 SW STATE RD 200
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DESENA, MARY
Address: 2541 W. DUNNELLON ROAD
City-St-Zip: DUNNELLON, FL 34434

Title: D (X) Change () Addition
Name: DESENA, FRANK
Address: 2541 W. DUNNELLON ROAD
City-St-Zip: DUNNELLON, FL 34434

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: MARY G. DESENA

D

01/06/2003

Electronic Signature of Signing Officer or Director

Date