

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 05, 2004 8:00 am**  
**Secretary of State**

05-05-2004 90204 047 \*\*\*150.00

DOCUMENT # **P02 000062792**

1. Entity Name  
**GENERAL MAINTENANCE INC**



**DO NOT WRITE IN THIS SPACE**

**24071153**

2. Principal Place of Business  
**2701 S ORLANDO DR ORL 327952011**

3. Mailing Address  
**0 Apts. #, etc. 17 Suite, Apt. #, etc.**

City & State  
**SANFORD FL**

Country  
**Seminole**

City & State  
**LAME MARY FL**

Country  
**Seminole**

4. FEI Number  
**81-0555179**

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
**RONALD DICHLER**

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

**2706 S ORLANDO DR**

City  
**SANFORD**

State  
**FL**

Zip  
**32773**

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 **Ronald Dickler** **RONALD DICHLER 4-20-04**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**P/T  
RONALD DICHLER  
2706 S ORLANDO DR  
SANFORD FL 32773**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**V.P.  
HOWARD DICHLER  
27222 DAYFLOWER BLVD  
WISLEY CHAPEL FL**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
**S-FL  
S-FL 2 EBETH PALMER  
8736 GOLF TERR. JR  
WINTER PARK FL 32788**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **Ronald Dickler** **4-20-04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**407-474-1917**

CR2E034B (12/02)