

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P15520

1. Entity Name
CARLETON TECHNOLOGIES, INC.

FILED
Aug 08, 2000 8:00 am
Secretary of State

08-08-2000 90026 012 ***550.00

Principal Place of Business
3910 RIGA BLVD.
SABAL INDUSTRIAL PARK
TAMPA FL 33619

Mailing Address
10 COBHAM DRIVE
ORCHARD PARK NY 14127
US

2. Principal Place of Business
3018 US Highway 301 N.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Tampa, Florida

City & State

4. FEI Number 16-1303637

Applied For
Not Applicable

Zip
33619

Country
USA

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PAGE, GORDON
COBHAM PLC, BROOK ROAD/WIMBORNE, DORSET
ENGLAND BH21 2BJ ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CPD
CAWDERY, PADRAIG H
10 COBHAM DRIVE
ORCHARD PARK NY 14127 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
GRABON, JOHN
10 COBHAM DRIVE
ORCHARD PARK NY 14127 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCCANN, EDWARD
293 BOSTON POST ROAD
WESTON MA 02493 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
YARBOROUGH, WILLIAM G
8000 TOWERS CRESENT DR.
VIENNA VA 22182 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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: Padraig H. Cawdery
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/00

Date

716-662-0006

Daytime Phone #

CR2E034 (5/00)