

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90070 007 ***150.00

DOCUMENT # P27897

1. Entity Name
HENDRIX AND DAIL, INC.

Principal Place of Business

1101 INDUSTRIAL BLVD.
GREENVILLE NC 27834
US

Mailing Address

P.O. BOX 648
GREENVILLE NC 27835-0648
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-0809154

Applied For

Not Applicable

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

HRUBY, ROGER
7610 US HIGHWAY 41N
PALMETTO FL 34221

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P D** ☐ Delete
NAME **STORKAN, DEAN C**
STREET ADDRESS **P.O. BOX 1327 8770 HWY. 25**
CITY-ST-ZIP **HOLLISTER CA 95024**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **PERREAU, VICTOR S.**
STREET ADDRESS **1821 SANDCREST DRIVE**
CITY-ST-ZIP **ROCKINGHAM, N.C. 28379**

TITLE **VDD** ☐ Delete
NAME **MCLAWHORN, W. CARROLL**
STREET ADDRESS **3300 WALDEN DR.**
CITY-ST-ZIP **GREENVILLE NC 27834**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **MCCASLIN, MARK**
STREET ADDRESS **4490 GARDEN TREE RD**
CITY-ST-ZIP **JEMECULA, CA 92592-3531**

TITLE **VSD** ☐ Delete
NAME **HRUBY, ROGER**
STREET ADDRESS **9614 BRADEN RUN RD**
CITY-ST-ZIP **BRADENTON FL 34202**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **FOWLER, KIRK**
STREET ADDRESS **605 LANINI DR**
CITY-ST-ZIP **HOLLISTER, CA 95023-6448**

TITLE **ND** ☐ Delete
NAME **LEMONS, CLARENCE**
STREET ADDRESS **P.O. BOX 589 2564 BODIE CURRIN ROAD**
CITY-ST-ZIP **OXFORD NC 27565**

TITLE **DIRECTOR** ☒ Change ☐ Addition
NAME **PERREAU, VICTOR S.**
STREET ADDRESS **1821 SANDCREST DRIVE**
CITY-ST-ZIP **ROCKINGHAM, N.C. 28379**

TITLE **D** ☐ Delete
NAME **HENDRIX, JAMES W**
STREET ADDRESS **1144 WHITE OAK PIKE**
CITY-ST-ZIP **STAMPING GROUND KY 40379**

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

TITLE **V** ☐ Delete
NAME **LYERLY, STEVE**
STREET ADDRESS **9610 US HWY 41 NORTH**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/02 (252) 758-4263

CR2E034 (9/01)