

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P39722

1. Entity Name

UAS AUTOMATION SYSTEMS, INC.

FILED
Jan 27, 2000 8:00 am
Secretary of State

01-27-2000 90130 043 ***158.75

Principal Place of Business

Mailing Address

4524 PARKWAY COMMERCE BOULEVARD
ORLANDO FL 32808

4524 PARKWAY COMMERCE BOULEVARD
ORLANDO FL 32808-1014

2. Principal Place of Business

3405 Lake Breeze Rd.

Suite, Apt. #, etc.

3. Mailing Address

3405 Lake Breeze Rd.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Orlando, FL

City & State
Orlando, FL

4. FEI Number 06-1082903

Applied For
Not Applicable

Zip
32808

Country
USA

Zip
32808

Country
USA

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

6. Name and Address of Current Registered Agent

MCGURK, LARRY J
4524 PARKWAY COMMERCE BOULEVARD
ORLANDO FL 32808

7. Name and Address of New Registered Agent

Name Larry J. McGurk

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

3405 Lake Breeze Rd.

City Orlando

FL

Zip Code
32808

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

LARRY J. MCGURK, PRESIDENT 1-14-00

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, 2000 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 CD
NAME WEEDEN, DONALD E
STREET ADDRESS 85 MIDDLE RIVER ROAD
CITY-ST-ZIP DANBURY CT ☐ Delete

TITLE PD
NAME MCGURK, LARRY J
STREET ADDRESS 357 WEKIVA COVE ROAD
CITY-ST-ZIP LONGWOOD FL ☐ Delete

TITLE SD
NAME HEARTY, JOHN R
STREET ADDRESS 21 HUNTING RIDGE ROAD
CITY-ST-ZIP BOOKFIELD CT ☐ Delete

TITLE D
NAME GATI, IVAN
STREET ADDRESS 114 BRUSH HOLLOW
CITY-ST-ZIP RYE BROOK NY ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY J. MCGURK

Date

Daytime Phone #

1-14-00

407-294-8551

CR2E034 (9/99)