

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000057509

1. Entity Name

UNIVERSAL PACKAGING, INC.

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90276 004 ***150.00

Principal Place of Business
1200 CHARLES STREET
#100
LONGWOOD FL 32750

Mailing Address
1200 CHARLES STREET
#100
LONGWOOD FL 32750

U0051498



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1260 AMERICAN WAY
Suite, Apt. #, etc.
106

3. Mailing Address
1260 AMERICAN WAY
Suite, Apt. #, etc.
106

City & State
Longwood, FL

City & State
Longwood, FL

Zip
32750

Country
SEMINOLE

Zip
32750

Country
SEMINOLE

4. FEI Number 59-3199651

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
OXBOROUGH, JOSEPH R
1832 ALAGUA DRIVE
LONGWOOD FL 32779

7. Name and Address of New Registered Agent
Name
CARL G. Oden
Street Address (P.O. Box Number is Not Acceptable)
2973 WSR 434 #100
City
Longwood FL Zip Code
32779

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 Carl G Oden (Carl G. Oden) DATE 1-22-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PVP	OXBOROUGH, JOSEPH R	1832 ALAGUA DRIVE	LONGWOOD FL 32779	<input checked="" type="checkbox"/>
ST	ODEN, CARL	2973 W R 434	LONGWOOD FL 32779	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
President / Director	JEFF YATES	1345 BUNNELL Rd	Apopka, FL 32703	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Vice President / Director	Craig D. Day	720 Brooks CT	Winter Springs, FL 32708	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Carl G Oden (Secy-Tor) DATE 1-22-01 DAYTIME PHONE # (407) 682 1772
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)