

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90162 038 ***150.00

DOCUMENT # P94000041576

1. Entity Name:

BUILDING TECHNOLOGIES INCORPORATED

Principal Place of Business

**BUILDING 121
 BARTOW AIR BASE
 BARTOW FL 33830**

Mailing Address

**BUILDING 121
 BARTOW AIR BASE
 BARTOW FL 33830**

2. Principal Place of Business

3. Mailing Address

P.O. Box 1415

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Highland City, FL

Zip

Country

Zip

Country

33846

USA

4. FEI Number

59-3269433

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**DOWNING, GRANT T
 222 W COMSTOCK AVE
 SUITE 101
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name **William Masters**

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

3453 Southeast Blvd.

City **Lakeland**

FL

Zip Code **33813**

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

04/30/02

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

TITLE **D** ☐ Delete
 NAME **MASTERS, WILLIAM**
 STREET ADDRESS **BUILDING 121 BARTOW AIR BASE**
 CITY-ST-ZIP **BARTOW FL 33830**

TITLE **D** ☐ Delete
 NAME **KALKER, WILLIAM JR**
 STREET ADDRESS **BUILDING 121 BARTOW AIR BASE**
 CITY-ST-ZIP **BARTOW FL 33830**

TITLE **D** ☒ Delete
 NAME **WEEDER, CHARLES E**
 STREET ADDRESS **BUILDING 121 BARTOW AIR BASE**
 CITY-ST-ZIP **BARTOW FL 33830**

TITLE **D** ☒ Delete
 NAME **AMANN, DAVID W**
 STREET ADDRESS **BUILDING 121 BARTOW AIR BASE**
 CITY-ST-ZIP **BARTOW FL 33830**

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
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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 all other like empowered.

SIGNATURE:

William C. Masters
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/02

863 6026875

Date

Daytime Phone #

CR2E034 (9/01)