

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000084126

1. Entity Name

MCDANIEL FIRE PROTECTION SYSTEMS, INC.

**FILED**  
**May 30, 2000 8:00 am**  
**Secretary of State**

05-30-2000 90087 014 \*\*\*150.00

Principal Place of Business

10231 METRO PKWY  
 #205  
 FORT MYERS FL 33912  
 US

Mailing Address

10231 METRO PKWY  
 #205  
 FORT MYERS FL 33912-1027  
 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 59-3281524

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

## 7. Name and Address of New Registered Agent

MCDANIEL, JERRY  
 13505 EAGLE RIDGE RD.  
 SUITE 428  
 FT. MYERS FL 33912

Name Jerry McDaniel  
 Street Address (P.O. Box Number is Not Acceptable)  
10231 Metro Pkwy  
#205  
 City Ft. Myers FL Zip Code 33912

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]  
 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, 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

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS MCDANIEL, JERRY  
 CITY-ST-ZIP 3745 BURTWOOD DRIVE  
 FORT MYERS FL 33908

TITLE ☒ Change ☐ Addition  
 NAME 10231 metro Pkwy #205  
 STREET ADDRESS Fort Myers, FL 33912-1027  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME D  
 STREET ADDRESS BORCHECK, MICHAEL S  
 CITY-ST-ZIP 201 N. NEW YORK AVE., SUITE G  
 WINTER PARK FL 32789

TITLE ☒ Change ☐ Addition  
 NAME 175 Lookout Place #101  
 STREET ADDRESS Maitland, FL 32751  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
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 STREET ADDRESS  
 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 all other like empowered.

SIGNATURE: [Signature]  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)