

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90004 037 ***150.00

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 AV

DOCUMENT # P95000007862

1. Entity Name
CUB CADET OF BREVARD, INC.

Principal Place of Business

**3737 N. US 1
 COCOA FL 32926**

Mailing Address

**3737 N. US 1
 COCOA FL 32926**

2. Principal Place of Business

496 Louis Drive

Suite, Apt. #, etc.

3. Mailing Address

496 Louis Drive

Suite, Apt. #, etc.

City & State

Cocoa FL

City & State

Cocoa FL

4. FEI Number

59-3298584

Applied For

Not Applicable

Zip

32926

Country

USA

Zip

32926

Country

USA

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

STEWART, WILLIAM H

3737 N. US 1

COCOA FL 32926

Name

William Stewart

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

496 Louis Drive

City

Cocoa

FL

Zip Code

32926

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 **DP** ☐ Delete
 NAME **STEWART, WILLIAM H**
 STREET ADDRESS **4660 LIME ST.**
 CITY-ST-ZIP **COCOA FL 32926**

TITLE **D** ☐ Change ☐ Addition
 NAME **Stewart, William H**
 STREET ADDRESS **4660 Lime Street**
 CITY-ST-ZIP **Cocoa FL 32926**

TITLE **DV** ☐ Delete
 NAME **STEWART, EDNA**
 STREET ADDRESS **4660 LIME ST.**
 CITY-ST-ZIP **COCOA FL 32926**

TITLE **P,VP,S,T** ☐ Change ☐ Addition
 NAME **Stewart, Edna**
 STREET ADDRESS **4660 Lime Street**
 CITY-ST-ZIP **Cocoa FL 32926**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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 H Stewart** Director **2-19-02** **321-632-6696**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)