

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State
 01-31-2001 90307 016 ***150.00

DOCUMENT # P95000034381

1. Entity Name
ENTEC ENGINE AND RESEARCH CORPORATION

Principal Place of Business Mailing Address
 PO BOX 8507 PO BOX 8507
 MADEIRA BEACH FL 33738-8507 MADEIRA BEACH FL 33738-8507
 US US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3310673**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GONZALEZ, ANGELO
 7490 30TH AVENUE NORTH
 ST. PETERSBURG FL 33710

Name **FRANK LEEDS III**
 Street Address (P.O. Box Number is Not Acceptable)

2301 3rd Ave S

City **St Petersburg** FL Zip Code **33712**

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 **FRANK LEEDS III** **Frank Leeds III** **1-25-01**
 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
 NAME **LIVELY, EDWIN L II**
 STREET ADDRESS **10404 138TH STREET NORTH**
 CITY-ST-ZIP **LARGO FL 34644**

TITLE ☐ Change ☐ Addition
 NAME **GONZALES, Angelo**
 STREET ADDRESS **7490 30th Ave N**
 CITY-ST-ZIP **St Petersburg, FL 33710**

TITLE **D** ☒ Delete
 NAME **LINZEY, DONALD F**
 STREET ADDRESS **6620 WAYLAND**
 CITY-ST-ZIP **RAVENNA OH 44266**

TITLE ☐ Change ☐ Addition
 NAME **Treasurer**
 STREET ADDRESS **Kevin Boyland**
 CITY-ST-ZIP **14226 84th Terr. N. Seminole FL 33702**

TITLE **D** ☐ Delete
 NAME **HARRIS, ROBERT**
 STREET ADDRESS **14295 CHAMBERLAIN AVENUE**
 CITY-ST-ZIP **LARGO FL 33464**

TITLE ☒ Change ☐ Addition
 NAME **BARRIS, Robert**
 STREET ADDRESS
 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 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: **Frank Leeds III, President** **1-25-01** **727-322-9444**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)