

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90099 004 ***150.00

DOCUMENT # P95000046265

1. Entity Name
STANDBY SYSTEMS, INC.



Principal Place of Business
**700 S JOHN RODES BLVD
BUILDING D-1
MELBOURNE FL 32904
US**

Mailing Address
**700 S JOHN RODES BLVD
BUILDING D-1
MELBOURNE FL 32904
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 **59-3321304**

Applied For
Not Applicable

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

**DAVIS, NORMAN L JR.
697 SPRING LAKE DRIVE
MELBOURNE FL 32940**

Name

DAVIS, NORMAN L JR.

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

3191 TUSCAWILLOW DR

City

Melbourne

FL

Zip Code

32934

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DAVIS, NORMAN L
697 SPRING LAKE DRIVE
MELBOURNE FL 32940** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
DAVIS, NORMAN L JR.
3191 TUSCAWILLOW DR
Melbourne, FL. 32934** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DAVIS, NANCY
697 SPRING LAKE DRIVE
MELBOURNE, FL. 32940** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V/D
DAVIS NANCY
3191 TUSCAWILLOW DR.
Melbourne, FL. 32934** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**C
DAVIS, NORMAN L III
697 SPRING LAKE DR
MELBOURNE FL 32904** ☒ Delete

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

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NANCY DAVIS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/03 (321) 952-1606

Date

Daytime Phone #

CR2E034 (10/02)