

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000077228

1. Entity Name

AQUILACO, INC.

Principal Place of Business

6000 GENTLE BEN CIR.
ZEPHYRHILLS FL 33544
US

Mailing Address

6000 GENTLE BEN CIR.
ZEPHYRHILLS FL 33544
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 59-3340331

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MEYER, CINDY
5339 VILLAGE MARKET
WESLEY CHAPEL FL 33543-2525

Address Change:

7. Name and Address of New Registered Agent

Name MEYER, CINDY
Street Address (P.O. Box Number is Not Acceptable)
6000 Gentle Ben Circle
City Wesley Chapel FL Zip Code 33544

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

2-27-01

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

TITLE	SV	<input type="checkbox"/> Delete
NAME	PASTIRJAK, JULIETTE	
STREET ADDRESS	1847 SAILFISH ROAD	
CITY-ST-ZIP	PASADENA FL	
TITLE	PT	<input type="checkbox"/> Delete
NAME	MEYER, CINDY	
STREET ADDRESS	3743 SANDLEWOOD DRIVE	
CITY-ST-ZIP	LAND O'LAKES FL	
TITLE	JOHN FESS VICE PRESIDENT	<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	100004430421--9	
STREET ADDRESS	-06/19/01--01092--007	
CITY-ST-ZIP	****558.75 ****558.75	
TITLE	PT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEYER, CINDY	
STREET ADDRESS	6000 Gentle Ben Circle	
CITY-ST-ZIP	Wesley Chapel, FL 33544	
TITLE	VICEPRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHN FESS	
STREET ADDRESS	6000 Gentle Ben Circle	
CITY-ST-ZIP	Wesley Chapel, FL 33544	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CINDY MEYER

2-27-01

(813) 973-1318

Date

Daytime Phone #

APPROVED
AND
FILED

JUN 14 AM 11:40



SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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