

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000025292

FILED  
Apr 01, 2002 8:00 AM  
Secretary of State

Entity Name: MIKE QUINN EQUIPMENT CO.

## Current Principal Place of Business:

4072 RIGHT STREET  
COCOA, FL 32926

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 7070  
ROCKLEDGE, FL 32955

## New Mailing Address:

P.O. BOX 1534  
MERRITT ISLAND, FL 32954

FEI Number: 59-3384044

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUINN, MICHAEL D  
845 MONTEGO BAY DRIVE SOUTH  
MERRITT ISLAND, FL 32953 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: QUINN, MICHAEL D  
Address: 845 MONTEGO BAY DRIVE SOUTH  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VPD ( ) Delete  
Name: BILODEAU, RICK  
Address: 1719 HUBBARD DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: QUINN, CATHY  
Address: 845 MONTEGO BAY DRIVE SOUTH  
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHERINE QUINN

VP

04/01/2002

Electronic Signature of Signing Officer or Director

Date