2002 Uniform Business Report (UBR)

13. I hereby certify that the information supplied with this filing indicated on this report or supplemental report is true and of the corporation or the receiver or trustee empo changed, or on an attachment with an address, y

SIGNATURE:

Mar 13, 2002 8:00 am § DOCUMENT # P96000049827 **Secretary of State** 1. Entity Name 03-13-2002 90069 049 ***158.75 AGRIMOND, INCORPORATED. Principal Place of Business Mailing Address 8910 ASTRONAUT BLVD. 8910 ASTRONAUT BLVD. CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3532669 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 🗻 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TERAN, ALFREDO J Street Address (P.O. Box Number is Not Acceptable) 808 WEST CENTRAL BOULEVARD CAPE CANAVERAL FL 32920 City Zip Code 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Addition ☐ Delete TITLE ☐ Change NAME TERAN, ALFREDO J NAME CR2E034 STREET ADDRESS 808 W CENTRAL BLVD STREET ADDRESS CITY-ST-ZIP CAPE CANAVERAL FL 32920 CITY-ST-ZIP TITLE Change Addition TITLE **VP** ☐ Delete NAME DEEKS, PETER C NAME STREET ADDRESS STREET ADDRESS 4155 CROOKD MILE ROAD CITY-ST-ZIP CITY_ST-ZIP MERRITT ISLAND FL 32952 --☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME WOOD, RICHARD C STREET ADDRESS STREET ADDRESS 255 BANANA BLVD CITY-ST-ZIP CITY-ST-7IP **MERRITT ISLAND FL 32952** TITLE ☐ Delete TITLE Change ☐ Addition NAME HARGROVE, ARTHUR JR NAME STREET ADDRESS 1711 WALLER RD STREET ADDRESS CITY-ST-ZIP **HUNTSVILLE AL 35801** CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition SHERARD, MARCO J NAME STREET ADDRESS STREET ADDRESS 4780 YUMA TRAIL CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953 TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information curate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director cute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 is

(9/01)