

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P96000064315

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1. Entity Name

GREASED LIGHTNING INTERNATIONAL, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
620 STATE ROAD 542

3. Mailing Address  
620 STATE ROAD 542

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
DUNDEE, FL

City & State  
DUNDEE, FL

4. FEI Number 59-3402871

Applied For  
Not Applicable

Zip 33838

Country

Zip 33838

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name Ronald G. Hock

Street Address (P.O. Box Number is Not Acceptable)  
101 E. Kennedy Blvd., Suite 4100

City Tampa

FL

Zip Code 33602

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 Ronald G. Hock

RONALD G. HOCK

6-25-02

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) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
D/P/CEO  
David C. Parker  
620 State Road 542  
Dundee, FL 33838

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
S  
Marc C. Bergschneider  
260 Redding Road  
Easton, CT 06612

TITLE  
NAME  
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CITY - ST - ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

David C. Parker, President/CEO

Date

Daytime Phone #

6/10/02 914-697-9416

CR2E034B (12/01)

75 8/21/02