

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000081124

1. Entity Name

POWERSHIFT, INC.

FILED
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90317 005 ***150.00

Principal Place of Business

5763 ARNOLD ZLOTOFF DRIVE
ORLANDO FL 32821

Mailing Address

11310 S. ORANGE BLOSSOM TRAIL
#187
ORLANDO FL 32837
US

2. Principal Place of Business

8517 South Park Cir

3. Mailing Address

8517 South Park Cir

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 230

Suite 230

City & State

City & State

Orlando, FL.

Orlando, FL.

Zip

Country

Zip

Country

32819

USA

32819

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3408697

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SADIE, JUAN J
5763 ARNOLD ZLOTOFF DR.
ORLANDO FL 32821

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

Juan J. Sadie

(NOTE: Registered Agent signature required when reinstating)

DATE

4/12/01

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 PD
NAME SADIE, JUAN J
STREET ADDRESS 5763 ARNOLD ZLOTOFF DR
CITY-ST-ZIP ORLANDO FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Senior Vice President (svp)
NAME John A. Dunwoody
STREET ADDRESS 9134 Great Heron Circle
CITY-ST-ZIP Orlando, FL 32836

☐ Change

☒ Addition

TITLE Senior Vice President (svp)
NAME George Bender Swygert, Jr.
STREET ADDRESS 5803 Lake Victoria Drive
CITY-ST-ZIP Lakeland, FL 33813

☐ Change

☒ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

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

Juan J. Sadie

Date

4/12/01 407-855-9400

Daytime Phone #

CR2E034 (10/00)