

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000005274

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: SUSAN M. WEIGLE, INC.

Current Principal Place of Business:

2600 SOUTHEAST 40TH STREET
OCALA, FL 34480

New Principal Place of Business:

5462 S SUNCOAST BOULEVARD
HOMOSASSA SPRINGS, FL 34446

Current Mailing Address:

2600 SOUTHEAST 40TH STREET
OCALA, FL 34480

New Mailing Address:

P.O. BOX 4576
HOMOSASSA SPRINGS, FL 34447

FEI Number: 59-3424229

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOCKWOOD, BRIAN R ESQ
309 N.W. 1ST STREET
GAINESVILLE, FL 326012525 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: D () Delete
Name: WEIGLE, SUSAN M
Address: 2600 SOUTHEAST 40TH STREET
City-St-Zip: OCALA, FL 34480

Title: PVST () Delete
Name: WEIGLE, SUSAN M
Address: 2600 SOUTHEAST 40TH STREET
City-St-Zip: OCALA, FL 34480

Title: D () Delete
Name: WEIGLE, JAMES J JR
Address: 2600 SOUTHEAST 40TH STREET
City-St-Zip: OCALA, FL 34480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WEIGLE, SUSAN M
Address: 5276 S RIVERVIEW CIRCLE
City-St-Zip: HOMOSASSA, FL 34448

Title: PVST (X) Change () Addition
Name: WEIGLE, SUSAN M
Address: 5276 S RIVERVIEW CIRCLE
City-St-Zip: HOMOSASSA, FL 34448

Title: D (X) Change () Addition
Name: WEIGLE, JAMES J JR
Address: 5276 S RIVERVIEW CIRCLE
City-St-Zip: HOMOSASSA, FL 34448

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: SUSAN M WEIGLE

P

04/29/2002

Electronic Signature of Signing Officer or Director

Date