

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000066009

1. Entity Name

SPEED AVIATION INC.

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90122 040 ***158.75

00008607



DO NOT WRITE IN THIS SPACE

Principal Place of Business 155 31ST AVE SW VERO BEACH FL 32968 US	Mailing Address 155 31ST AVE SW VERO BEACH FL 32968 US
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2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	65-0785527	Applied For
		Not Applicable

5. Certificate of Status Desired	☒ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SIGLER, GEORGE B 155 31ST AVE SW VERO BEACH FL 34968

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. (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)

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	PT
NAME	SIGLER, GEORGE
STREET ADDRESS	155 31ST AVE SW
CITY-ST-ZIP	VERO BEACH FL 32968
☐ Delete	
TITLE	S
NAME	LIGHTFOOT, JUDITH
STREET ADDRESS	155 31ST AVE SW
CITY-ST-ZIP	VERO BEACH FL 32968
☐ Delete	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Delete	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Delete	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Delete	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Change ☐ Addition	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Change ☐ Addition	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ Change ☐ Addition	
TITLE	☐ Change ☐ Addition
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: Judith E. Lightfoot JUDITH E. LIGHTFOOT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/01 361-770-2252

Date Daytime Phone #

CR2E034 (10/00)