

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000072806

1. Entity Name

JUMBO MANUFACTURERS AND ENGINEERING, INC.

Principal Place of Business

7218 HUMMINGBIRD LANE
NEW PORT RICHEY, FL 34652

Mailing Address

2623 GRAND BLVD
UNIT #113
HOLIDAY FL 34690

2. Principal Place of Business

5608 WRAY WAY

3. Mailing Address

5608 WRAY WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Holiday Florida

City & State
Holiday Florida

Zip
34690

Country
U.S.A.

Zip
34690

Country
U.S.A.

4. FEI Number 59-3464335

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARLE, JOHN S
2623 GRAND BLVD
UNIT 113
HOLIDAY FL 34690

Name
BARTLE JOHN S.

Street Address (P.O. Box Number is Not Acceptable)
5608 WRAY WAY

City Holiday FL Zip Code 34690

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]

BARTLE JOHN S.

PD 2/28/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME BARTLE, JOHN S
STREET ADDRESS 7218 HUMMINGBIRD LANE
CITY-ST-ZIP NEW PORT RICHEY FL 34652 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD
NAME APPELGRUN, JOHANNES J
STREET ADDRESS 7218 HUMMINGBIRD LANE
CITY-ST-ZIP NEW PORT RICHEY FL 34652 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD
NAME BARTLE, ANNA C
STREET ADDRESS 7218 HUMMINGBIRD LANE
CITY-ST-ZIP NEW PORT RICHEY FL 34652 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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]

BARTLE JOHN S.

2/28/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)