## 2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empew

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: Patricia A. Becker, (A.

## Mar 03, 2000 8:00 am DOCUMENT # **P97000077209 Secretary of State** AERIAL IMAGES, INC. 03-03-2000 90263 039 \*\*\*150.00 Principal Place of Business Mailing Address 4320 COLONIAL BLVD 4320 COLONIAL BLVD FORT MYERS FL 33912-1064 FORT MYERS FL 33912 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3465985 Not Applicable Zip Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BECKER, JOHN B Street Address (P.O. Box Number is Not Acceptable) 4320 COLONIAL BLVD FORT MYERS FL 33912 Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change Addition ☐ Delete TITLE TITLE BECKER, JOHN B NAME NAME STREET ADDRESS 18164 DEEP PASSAGE LANE SW STREET ADDRESS 6980 Cherokee Avenue CITY-ST-ZIP Fort Myers, FL 33905 CITY-ST-ZIP FORT MYERS BEACH FL 33931 ☐ Addition ☐ Delete X Change TITLE BECKER, PATRICIA A NAME NAME 18164 DEEP PASSAGE LANE SW STREET ADDRESS 6980 Cherokee Avenue STREET ADDRESS CITY-ST-ZIP FORT MYERS BEACH FL 33931 CITY-ST-ZIP Fort Myers, FL 33905 $\sqrt{V/D}$ X Addition Change A ITIT. ☐ Delete TITLE BECKER, JOHN B., JR. NAME NAME STREET ADDRESS 6708 Fairview Street STREET ADDRESS CITY-ST-ZIP Fort Myers, FL 33912 CITY-ST-ZIP ☐ Addition TITLE ☐ Change Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

FILED

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Davtime Phone #

2/24/00