

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000085875

1. Entity Name

NAPIER ENGINEERING, INC.

FILED
Apr 16, 2002 8:00 am
Secretary of State

04-16-2002 90155 048 ***150.00

0043523 AV

Principal Place of Business

3436 GALLANT FOX TRL.
TALLAHASSEE FL 32308

Mailing Address

3436 GALLANT FOX TRL.
TALLAHASSEE FL 32308

2. Principal Place of Business

3436 Gallant Fox Trail

3. Mailing Address

3436 Gallant Fox Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, Florida

City & State

Tallahassee, Florida

Zip

32309

Country

USA

Zip

32309

Country

USA

4. FEI Number

59-3471532

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NAPIER, THOMAS L
3436 GALLANT FOX TRL.
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name Thomas L. Napier

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

3436 Gallant Fox Trail

City Tallahassee

FL

Zip Code 32309

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 Thomas L. Napier

4/9/02

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, 2002 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 P ☐ Delete
NAME NAPIER, T L
STREET ADDRESS 3436 GALLANT FOX TR
CITY-ST-ZIP TALL FL 32308

TITLE S ☐ Delete
NAME NAPIER, MONICA F
STREET ADDRESS 3436 GALLANT FOX TRAIL
CITY-ST-ZIP TALLAHASSEE FL 32308

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Thomas L. Napier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/02

Date

850-513-0355

Daytime Phone #

CR2E034 (9/01)