

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000096227

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: SCORPION, INC.

**Current Principal Place of Business:**

9003 PINE NEEDLE CIRCLE  
BRADENTON, FL 34202

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 20127  
BRADENTON, FL 34204

**New Mailing Address:**

FEI Number: 65-0799058

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FAVICCHIO, MICHAEL W  
406 SARASOTA QUAY  
SARASOTA, FL 34236 US

**Name and Address of New Registered Agent:**

FAVICCHIO, MICHAEL W  
1715 STICKNEY POINT ROAD  
SARASOTA, FL 34231 US

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

04/30/2002

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: PD ( ) Delete  
Name: MACOMBER, SANDRA A  
Address: 9003 PINE NEEDLE CIRCLE  
City-St-Zip: BRADENTON, FL 34202

Title: S ( ) Delete  
Name: FAVICCHIO, MICHAEL  
Address: 406 SARASOTA QUAY  
City-St-Zip: SARASOTA, FL 34236

Title: T ( ) Delete  
Name: MACOMBER, SANDRA A  
Address: 9003 PINE NEEDLE CIRCLE  
City-St-Zip: BRADENTON, FL 34202

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: FAVICCHIO, MICHAEL  
Address: 1715 STICKNEY POINT ROAD  
City-St-Zip: SARASOTA, FL 34231

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SANDRA A. MACOMBER

Electronic Signature of Signing Officer or Director

PD

04/30/2002

Date