

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000014737

1. Entity Name
DUTCH PRECISION, INC.

FILED
Jan 08, 2002 8:00 am
Secretary of State

01-08-2002 90010 018 ***150.00

0542940 AV

Principal Place of Business
6603 INDUSTRIAL AVE.
PORT RICHEY FL 34668

Mailing Address
6603 INDUSTRIAL AVE.
PORT RICHEY FL 34668

2. Principal Place of Business
Dutch Precision, Inc.
Suite, Apt., Etc.
5914 - A Dasher Court
Port Richey, FL 34668

3. Mailing Address
Dutch Precision, Inc.
Suite, Apt., Etc.
5914 - A Dasher Court
Port Richey, FL 34668



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3517330

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

VAN WECHEL, BARRY
6603 INDUSTRIAL AVE.
PORT RICHEY FL 34668

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box, Apartment, etc. acceptable)
Dutch Precision, Inc.
5914 - A Dasher Court
Port Richey, FL 34668
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 *Barry Van Wechel*
Signature, typed or printed name of registered agent and title if applicable.

1-4-02
DATE

(NOTE: Registered Agent signature required when reinstating)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P VAN WECHEL, BARRY
6603 INDUSTRIAL AVE
PORT RICHEY FL 34668 *Same as above*

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
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

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

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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: *Barry Van Wechel*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-02 927-846-9474
Date Daytime Phone #

CR2E034 (9/01)