## **2000 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachm

SIGNATURE:

## DOCUMENT # P98000044765 May 24, 2000 8:00 am Secretary of State THE ENERGY PEOPLE OF SOUTHWEST FLORIDA, INC. 05-24-2000 90184 043 \*\*\*150.00 Principal Place of Business Mailing Address 3616 EVANS AVENUE 3616 EVANS AVENUE FORT MYERS FL 33901 FORT MYERS FL 34234-2146 2. Principal Place of Business naence BIVI DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0847862 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent Name and Address of Current Registered Ager GIRGIS, DAVID.A 3616 EVANS AVENUE FORT MYERS FL 33901 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE Delete TITLE GIRGIS, DAVID A NAME NAME STREET ADDRESS 3616 EVANS AVENUE STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33901 CITY-ST-ZIP ☐ Addition TITLE Delete ELSAYED, MIKE NAME NAME 13220-B ORANGE RIVER BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS FL 33905 CITY-ST-ZIP Change ☐ Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP. CITY-ST-7IP ☐ Addition TITLE Change TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 empowerer to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in the corporation of the corporation