

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000057638

1. Entity Name

SPACE COAST LOGISTICS, INC.

Principal Place of Business

3665 W KING STREET
COCOA FL 32926

Mailing Address

3665 W KING STREET
COCOA FL 32926

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3521178

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, DAVID B
3665 W KING STREET
COCOA FL 32926

Name

POLTA, Eugene K.

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

1806 Via Capri

City

Merritt Island

FL

Zip Code 32952

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

Eugene K Polta

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-5-01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Delete
NAME SMITH, BONNIE
STREET ADDRESS 3665 W KING ST
CITY-ST-ZIP COCOA FL 32926

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

TITLE VP ☒ Delete
NAME FULCHER, SHERIAN
STREET ADDRESS 806 WARREN AVE
CITY-ST-ZIP COCOA FL 32922

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

TITLE S ☒ Delete
NAME SMITH, DAVID B
STREET ADDRESS 3665 W KING ST
CITY-ST-ZIP COCOA FL 32926

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

TITLE T ☐ Delete
NAME FULCHER, DAVID E
STREET ADDRESS 806 WARREN AVE
CITY-ST-ZIP COCOA FL 32922

TITLE P/V/S ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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:

David E Fulcher David E Fulcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/13/01

00037595



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)