

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000086349**

1. Entity Name

TESCO SOUTHEAST, INCORPORATED**FILED**
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90130 002 ***150.00

0312166

Principal Place of Business Mailing Address
1301 N.W. THIRD ST. **1301 N.W. THIRD ST.**
DEERFIELD BEACH FL 33442 **DEERFIELD BEACH FL 33442**

C0066199

DO NOT WRITE IN THIS SPACE

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 65-0868668		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MANTEY, JAMES R
1301 N.W. THIRD ST.
DEERFIELD BEACH FL 33442

7. Name and Address of New Registered Agent

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

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, 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

TITLE	PT	<input type="checkbox"/> Delete
NAME	MANTEY, JAMES R	
STREET ADDRESS	1301 N.W. THIRD ST.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	VS	<input type="checkbox"/> Delete
NAME	MANTEY, SANDRA N	
STREET ADDRESS	1301 N.W. THIRD ST.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE	D	<input type="checkbox"/> Delete
NAME	MANTEY, PHILLIP M	
STREET ADDRESS	595 MINER RD.	
CITY-ST-ZIP	CLEVELAND OH 44143	
TITLE	D	<input type="checkbox"/> Delete
NAME	PETERSON, ROBERT A	
STREET ADDRESS	378 GULF PINE DR.	
CITY-ST-ZIP	PORT ST. JOE FL 32456	
TITLE	AS	<input type="checkbox"/> Delete
NAME	ROGERS, LORI	
STREET ADDRESS	1301 NW 3RD ST.	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	37807 WOLF RD.	
CITY-ST-ZIP	BAY VILLAGE, OH 44140	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *James R. Mantey* **JAMES R. MANTEY**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 19, 01 **954-429-3200**
Date Daytime Phone #

CR2E034 (10/00)