

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000087548

1. Entity Name

SOUTH EAST MOBILE AUTOMATION CORPORATION

Principal Place of Business

882 COLONIAL RD.
HAVANA FL 32333

Mailing Address

PO BOX 1037
HAVANA FL 32333-1037

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

BURTON, ARTHUR HENRY JR
882 COLONIAL RD
HAVANA FL 32333

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 VP
NAME BURTON, SYBLE C
STREET ADDRESS 882 COLONIAL DR
CITY-ST-ZIP HAVANA FL 32333 ☐ Delete

TITLE VS
NAME BURTON, SYBLE C
STREET ADDRESS 882 COLONIAL DR
CITY-ST-ZIP HAVANA FL 32333 ☒ Delete

TITLE D
NAME STRANGE, RANDALL L
STREET ADDRESS 101 JOYNER ST
CITY-ST-ZIP MIDWAY FL 32343 ☐ Delete

TITLE S
NAME DARDEN, SUSAN B
STREET ADDRESS 1134 OX BOTTOM RD
CITY-ST-ZIP TALLAHASSEE FL 32312 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/T
NAME BURTON, A. HENRY
STREET ADDRESS 882 COLONIAL DR.
CITY-ST-ZIP HAVANA, FL 32333 ☐ Change ☒ Addition

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

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

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

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

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:

Arthur Henry Jr. Burton Pres A. HENRY BURTON 4-25-01 (850) 539-8300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 17, 2001 8:00 am
Secretary of State

05-17-2001 90410 028 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3536596 ☐ Applied For
☐ Not Applicable

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

CR2E034 (10/00)