

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90262 018 ***550.00

U2, 14 A1

DOCUMENT # P99000024713

1. Entity Name

TRIDENT HYDRAULICS, INC.

Principal Place of Business

~~1120 N MAGNOLIA AVE UNIT 200~~
~~OCALA FL 34470~~

Mailing Address

~~1120 N MAGNOLIA AVE UNIT 200~~
~~OCALA FL 34470~~

80063933



2. Principal Place of Business

1133 N Magnolia Ave
 Suite, Apt. #, etc.

3. Mailing Address

1133 N Magnolia Ave
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ocala, FL

City & State

Ocala, FL

4. FEI Number

59-3566814

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HICKS, DANIEL
 421 S PINE AVE
 OCALA FL 34474

7. Name and Address of New Registered Agent

Name
J. Warren Bullard
 Street Address (P.O. Box Number is Not Acceptable)
 18 N.W. Third Avenue
 City Ocala FL Zip Code 34475

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 *J. Warren Bullard*

J. Warren Bullard

8/7/01

(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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 PD
 NAME MARTIN, JAY ☐ Delete
 STREET ADDRESS 1120 N MAGNOLIA AVE UNIT 200
 CITY-ST-ZIP OCALA FL 34470

TITLE VD ☒ Delete
 NAME MARTIN, JOL
 STREET ADDRESS 1120 N MAGNOLIA AVE UNIT 200
 CITY-ST-ZIP OCALA FL 34470

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V,S,D ☒ Change ☐ Addition
 NAME Martin, Jay
 STREET ADDRESS 1120 N. Magnolia Avenue, Unit 200
 CITY-ST-ZIP Ocala, FL 34470

TITLE P,T,D ☐ Change ☒ Addition
 NAME William G. Boothby
 STREET ADDRESS P.O. Box 3773
 CITY-ST-ZIP Ocala, FL 34478

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

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

TITLE ☐ Change ☐ Addition
 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 *William G. Boothby* **William G. Boothby, President**

8-31-01

(352) 368-5900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)