

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90072 014 ***158.75

0051838

DOCUMENT # P99000026607

1. Entity Name

AIR PRO OF CENTRAL FLORIDA, INC.

Principal Place of Business

105 W. CEDAR AVE.
 SUITE B
 ORANGE CITY FL 32763

Mailing Address

105 W. CEDAR AVE.
 SUITE B
 ORANGE CITY FL 32763

2. Principal Place of Business

143 S. Industrial Dr.

3. Mailing Address

143 S. Industrial Dr.

Suite, Apt. #, etc.

A1

Suite, Apt. #, etc.

A1

City & State

Orange City, FL

City & State

Orange City, FL

Zip

32763

Country

USA

Zip

32763

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3564591**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

QUESENBERRY, RICHARD
2037 DEARING AVE
DELTONA FL 32725

7. Name and Address of New Registered Agent

Name **Richard Quisenberry**

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

2620 Ardor Lane

City

Orange City

FL

Zip Code

32763

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

Richard W. Quisenberry

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

(NOTE: Registered Agent signature required when reinstating)

4/21/01

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 | P | <input type="checkbox"/> Delete |
| NAME | QUESENBERRY, RICHARD W | |
| STREET ADDRESS | 105 W. CEDAR AVE. | |
| CITY-ST-ZIP | ORANGE CITY FL 32763 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|---------------------------------|------------------------------------------------------------------------------|
| TITLE | P | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Quisenberry, Richard | |
| STREET ADDRESS | 148 S. Industrial Dr. A1 | |
| CITY-ST-ZIP | Orange City, FL 32763 | |
| 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 | | |
| 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: *Richard W. Quisenberry*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard W. Quisenberry

Date **4/21/01**

Daytime Phone #

386-774-0040

CR2E034 (10/00)