

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-29-2001 90403 017 ***150.00

DOCUMENT # P99000027539

1. Entity Name

ALLAN ELECTRONICS CORPORATION OF CENTRAL FL.

Principal Place of Business

14034 SULLIVAN ST
 SPRING HILL FL 34609

Mailing Address

14034 SULLIVAN ST
 SPRING HILL FL 34609

00029433



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12466 SPRING HILL DRIVE

3. Mailing Address

12466 SPRING HILL DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SPRING HILL, FL

City & State

SPRING HILL, FL

4. FEI Number

59-3565260

Applied For

Not Applicable

Zip

34609

Country

FLORIDA U.S.

Zip

34609

Country

U.S.

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

NELSON, HENRY A
 6465 107 TERRACE NORTH
 PINELLAS PARK FL 33782

Name

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

12466 SPRING HILL DRIVE

City

SPRING HILL, FL

FL

Zip Code

34609

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 CEO
 NELSON, EVELYN G
 14034 SULLIVAN ST
 SPRING HILL FL 34609 ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 P
 NELSON, HENRY A
 14034 SULLIVAN ST
 SPRING HILL FL 34609 ☐ Delete

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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TITLE
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 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: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/29/01

Daytime Phone #

356880671x21

CR2E034 (10/00)