

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Jul 20, 2000 8:00 am**  
**Secretary of State**

07-20-2000 90026 050 \*\*\*150.00

**DOCUMENT # P99000032509**

1. Entity Name

**ENERGY SENTINEL TRAPS OF FLORIDA, INC.**

*R*

Principal Place of Business

3510 SANDY HOLLOW RD  
CENTURY FL 32535

Mailing Address

3510 SANDY HOLLOW RD  
CENTURY FL 32535

A0068853



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

*Same*  
*3510 Sandy Hollow Rd*  
*Century FL*

3. Mailing Address

*P.O. Box 5*  
*Walnut Hill FL*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

*59-357-0295*

Applied For

Not Applicable

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

COON, WILLIAM P  
3510 SANDY HOLLOW RD  
CENTURY FL 32535

Name

*William P Coon*

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

*Same as above*

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

*William P Coon*

*07-09-2000*

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *William P Coon / President* ☐ Delete  
NAME  
STREET ADDRESS *P.O. Box 5*  
CITY-ST-ZIP *Walnut Hill, FL 32568*

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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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 P Coon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*07-09-00*

Daytime Phone #

*(850)*

*327-4901*

P99.000032509

ASBQ8853

## **ENERGY SENTINEL TRAPS of Florida, INC.**

**P.O. BOX 5  
Walnut Hill, FL 32568  
1-800-327-4901  
fax: 850-327-6035**

**July 17 , 2000**

**Division of Corporations  
P O Box 6327  
Tallahassee, FL 32314**

**As to our phone conversation on 07-17-2000, we are physically located at 3510 Sandy  
Hollow rd. Century, FL 32535 which is a rural address. In order to have more security  
with our mail we chose to use a P O Box 5, Walnut Hill, FL 32560. I checked with the**

**attorney's office and apparently the P O Box 5 was somehow omitted on my application.**

**This may be the reason we did not receive the previous correspondence from your office.**

**I appreciate your understanding and help in that there are times mail does end up in the  
wrong place, so I am forwarding my check and letter as agreed.**

**Thank you for your help on this matter.**

**Sincerely**



**Bill Coon  
Energy Sentinel Traps of Florida, Inc.**