

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90144 020 ***150.00

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DOCUMENT # P99000071694

1. Entity Name
CONTROL MANUFACTURING ASSEMBLY, INC.



Principal Place of Business
380 NORTH WICKHAM ROAD
STE. D
MELBOURNE FL 32935

Mailing Address
380 NORTH WICKHAM ROAD
STE. D
MELBOURNE FL 32935



2. Principal Place of Business
380 D WICKHAM RD.

3. Mailing Address
SAME

Suite, Apt. #, etc.
D

Suite, Apt. #, etc.
"

City & State
MELBOURNE FLA

City & State
"

Zip
32935

Country
BREVARD

Zip
"

Country
"

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

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

MCLEAN, PEARL B
380 NORTH WICKHAM ROAD
STE. D
MELBOURNE FL 32935

Name
SAME

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Thomas McLean**

5-11-2003

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCLEAN, THOMAS 2705 PARK PL BLVD #4 MELBOURNE FL 32935	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCLEAN, PEARL B 2705 PARK PLACE BLVD #4 MELBOURNE FL 32935	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DERBY, ELIZABETH A 1883 MCKINLEY AVENUE MELBOURNE FL 32935	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DERBY, VERNON E JR 1883 MCKINLEY AVENUE MELBOURNE FL 32935	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME	☐ 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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Thomas McLean**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-11-2003

Date

321-751-0555

Daytime Phone #

CR2E034 (10/02)