

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2002 8:00 am
Secretary of State

05-19-2002 90158 040 ***150.00

DOCUMENT # P99000085058

1. Entity Name

POLYMER INVESTMENT CORPORATION

Principal Place of Business

**813 ORIENTA AVENUE
 ALTAMONTE SPRINGS FL 32701
 US**

Mailing Address

**813 ORIENTA AVENUE
 ALTAMONTE SPRINGS FL 32701
 US**

2. Principal Place of Business

124 Live Oaks Blvd.
 Suite, Apt. #, etc.

3. Mailing Address

124 Live Oaks Blvd.
 Suite, Apt. #, etc.

City & State

Casselberry, FL

City & State

Casselberry, FL

Zip

32707

Country

USA

Zip

32707

Country

USA

4. FEI Number

59-3599645

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**SKINNER, MICHAEL
 1343 ALBERTA DRIVE
 WINTER PARK FL 32789**

7. Name and Address of New Registered Agent

Name

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.

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, 2002 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 **D** ☐ Delete
 NAME **SKINNER, MICHAEL**
 STREET ADDRESS **1343 ALBERTA DRIVE**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☐ Delete
 NAME **KELLER, RIKK**
 STREET ADDRESS **984 MAYFIELD AVENUE**
 CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☐ Delete
 NAME **HINDERLITER, KATIE**
 STREET ADDRESS **1312 GREEN COVE**
 CITY-ST-ZIP **WINTER PARK FL 32789**

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

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

TITLE ☒ Change ☐ Addition
 NAME **HINDERLITER, KATIE**
 STREET ADDRESS **1312 GREEN COVE**
 CITY-ST-ZIP **WINTER PARK, FL 32789**

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

CR2E034 (9/01)

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 title empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL SKINNER

4/25/02

407

047-3773

Date

Daytime Phone

EXT 113