

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90115 039 ***150.00

DOCUMENT # P99000109660

1. Entity Name

NOIR INVESTMENT CORPORATION

Principal Place of Business

Mailing Address

1207 S. THOMPSON AVENUE
DELAND FL 32720

1207 S. THOMPSON AVENUE
DELAND FL 32720

2. Principal Place of Business

1515 Covered Br.
Suite, Apt. #, etc.

3. Mailing Address

1515 Covered Bridge Dr.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Deland, Florida

City & State

Deland, FL

4. FEI Number

59-3613648

Applied For

Not Applicable

Zip

County

32724 Volusia

Zip

County

32724 Volusia

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, DONALD F
1207 S. THOMPSON AVENUE
DELAND FL 32720

7. Name and Address of New Registered Agent

Name: Andrew J. Randolph
Street Address (P.O. Box Number is Not Acceptable): 1515 Covered Bridge Drive
City: Deland FL Zip Code: 32724

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: Andrew J. Randolph, Andrew J. Randolph 3-9-2002
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	PD	<input type="checkbox"/> Delete
NAME	CORLEY, MILTON D SR.	
STREET ADDRESS	1207 S. THOMPSON AVENUE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WILLIAMS, MICHAEL	
STREET ADDRESS	1207 S. THOMPSON AVENUE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	SD	<input type="checkbox"/> Delete
NAME	RANDOLPH, ANDREW J	
STREET ADDRESS	1207 S. THOMPSON AVENUE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	ATD	<input checked="" type="checkbox"/> Delete
NAME	GIBSON, HENRY B	
STREET ADDRESS	605 E HIGHLAND AVE	
CITY-ST-ZIP	DELAND FL 32724	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	COOK, DONALD F	
STREET ADDRESS	1207 S THOMPSON AVE	
CITY-ST-ZIP	DELAND FL 32720	
TITLE	VPCD	<input type="checkbox"/> Delete
NAME	THOMAS, JOHN W	
STREET ADDRESS	1207 S THOMPSON AVE	
CITY-ST-ZIP	DELAND FL 32720	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	TD TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, JOHN W	
STREET ADDRESS	1207 S. THOMPSON AVE	
CITY-ST-ZIP	DELAND, FL 32720	
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: Andrew J. Randolph, Andrew J. Randolph 2-9-02 386-734-4453
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)