

2002 UNIFORM BUSINESS REPORT (UBR)

001414

DOCUMENT # S02354

1. Entity Name

~~DEYOUNG ENGINEERS, INC.~~

DeYOUNG ENGINEERING & MANAGEMENT, INC.

FILED

02 APR 30 PM 3:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

6442 US HIGHWAY 27 SOUTH
SEBRING FL 33876-57356442 US HIGHWAY 27 SOUTH
SEBRING FL 33876-5735

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3028917

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DEYOUNG, CURTIS J.
6442 US HIGHWAY 27 NORTH
SEBRING FL 33876

Name

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

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)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 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
|--|---------------------------------|---|---|
| DPT DEYOUNG, CURTIS J. 6442 U.S. HWY 27 S. SEBRING FL 33876 | <input type="checkbox"/> | 100005507771--2 -05/14/02--01016--005 ***150.00 ***150.00 | <input type="checkbox"/> |
| DS DEYOUNG, LINDA 6442 U.S. HWY 27 SO. SEBRING FL 33876 | <input type="checkbox"/> | | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |

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 TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Curtis J. DeYoung, Pres.

April 21, 2002 (863)386-0330

Date

Telephone Number

CR2E034 (10/00)