

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S40533

1. Entity Name

ENGINEWITY TECHNOLOGY, INC.

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90078 027 \*\*\*150.00

0363519

Principal Place of Business

Mailing Address

6090 45TH ST NORTH  
ST PETERSBURG FL 33714  
US

6090 45TH ST NORTH  
ST PETERSBURG FL 33714  
US

852044

2. Principal Place of Business

6553 46<sup>th</sup> ST. N

3. Mailing Address

6553 46<sup>th</sup> ST. N

Suite, Apt. #, etc.

UNIT #909

Suite, Apt. #, etc.

UNIT 909

DO NOT WRITE IN THIS SPACE



City & State

PINELLAS PARK, FL

City & State

PINELLAS PARK, FL

4. FEI Number

59-3093868

Applied For

Not Applicable

Zip

33781

Country

US

Zip

33781

Country

US

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

SURATT, TED L

6090 45TH ST NORTH

ST PETERSBURG FL 33714

Name

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

6553 46<sup>th</sup> ST. N.

UNIT #909

City

PINELLAS PARK,

FL

Zip Code

33781

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

TED L SURATT

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Delete  
NAME SURATT, TED L.  
STREET ADDRESS 6090 45TH ST NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33714

TITLE ☒ Change ☐ Addition  
NAME 6553 46<sup>th</sup> ST. N. #909  
STREET ADDRESS PINELLAS PARK, FL 33781  
CITY-ST-ZIP

TITLE DST ☐ Delete  
NAME SURATT, CAROL V  
STREET ADDRESS 6090 45TH ST NORTH  
CITY-ST-ZIP ST PETERSBURG FL 33714

TITLE ☒ Change ☐ Addition  
NAME 6553 46<sup>th</sup> ST. N. #909  
STREET ADDRESS PINELLAS PARK, FL 33781  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME STARGEL, MICHAEL T  
STREET ADDRESS 6090 45TH ST N  
CITY-ST-ZIP SAINT PETERSBURG FL 33714

TITLE ☒ Change ☐ Addition  
NAME 6553 46<sup>th</sup> ST. N. #909  
STREET ADDRESS PINELLAS PARK, FL 33781  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME SURATT, TED L II  
STREET ADDRESS 6090 45TH ST N  
CITY-ST-ZIP SAINT PETERSBURG FL 33714

TITLE ☒ Change ☐ Addition  
NAME 6553 46<sup>th</sup> ST. N. #909  
STREET ADDRESS PINELLAS PARK, FL 33781  
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  
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:

Carol V. Suratt  
SECRETARY/TREAS.

4/23/01 (727) 521-6577

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)