

DOCUMENT # V09362

1. Entity Name

AL DUBOIS INDUSTRIES, INC.

**FILED**  
**Jan 09, 2001 8:00 am**  
**Secretary of State**

01-09-2001 90009 046 \*\*\*150.00

Principal Place of Business

15206 ELMONT ST  
HUDSON FL 34610  
US

Mailing Address

P O BOX 11046  
SPRING HILL FL 34610  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3102856

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

DUBOIS, AL  
662 ELMONT  
HUDSON FL 34667

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, 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 P ☐ Delete  
NAME DUBOIS, ALPHONSE  
STREET ADDRESS P.O. BOX 11046 N/A  
CITY-ST-ZIP SPRING HILL FL

TITLE V ☒ Delete  
NAME WELLS, RONALD  
STREET ADDRESS 1110 E. CT. ST.  
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE S ☐ Delete  
NAME JIMMY HEINTZELMAN  
STREET ADDRESS 16521 JAYRE RD.  
CITY-ST-ZIP SPRING HILL FL

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE V ☒ Change ☒ Addition  
NAME Dubois, Douglas  
STREET ADDRESS 15416 Greenglen Lane  
CITY-ST-ZIP Spring Hills Fla

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

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

TITLE ☐ Change ☐ Addition  
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: Pres Alphonse J Dubois

Date

Daytime Phone #

1/5/2001 727-856-1661

CR2E034 (10/00)