**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 17, 2002 8:00 am Secretary of State F01000001260 DOCUMENT # 1. Entity Name 04-17-2002 90101 045 \*\*\*150.00 501815-ONTARIO LTD, INC. Principal Place of Business Mailing Address 1 BEACH DR., SE. STE 220 1 BEACH DR., SE, STE 220 STE PETERSBURG FL 33701 STE PETERSBURG FL 33701 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number **APPLIED FOR** Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBERGE, THOMAS C Street Address (P.O. Box Number is Not Acceptable) 1 BEACH DR., SE STE 220 ST PETERSBURG FL 33701 Zip Code City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be ¡Jax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Addition CR2E034 (9/01) TITLE PCD Delete TITLE ☐ Change MACEY, DAVID S NAME NAME 2799 BELLWOOD DR., RR #2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEWCASTLE, CANADA PRSSIDENT/ eth red ☐ Delete TITLE ☐ Addition NAME MACEY, CAROL A NAME DIRECTOR STREET ADDRESS 2799 BELLWOOD DR., RR #2 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEWCASTLE, CANADA SECRITARY / DIRECTOR | Change TITLE. Delete. TITLE NAME NAME KERRY A. HACEY STREET ADDRESS STREET ADDRESS 799 BELLWEDD DR RRI CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition こるとののの NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 CAROL MACEY

A Hachment # Followoolz60 632978 - INTERNATIONAL TAXATION -

## THOMAS C. ROBERGE & COMPANY

CERTIFIED PUBLIC ACCOUNTANTS

BRENT S. McLean, CPA THOMAS C. ROBERGE, CPA

April 8, 2002

Division of Corporations Uniform Business Report Filings P. O. Box 1500 Tallahassee, Florida 32302-1500

RE: 501815 ONTARIO LTD, INC.

To Whom It May Concern:

I am the Florida Registered Agent for the above referenced company. Enclosed is our check for \$150.00 for the 2002 Uniform Business Report.

Sincerely,

Thomas C. Roberge

TCR/c Enclosures

ONE BEACH DRIVE SE, SUITE 220 TELEPHONE: 727 822-9393 FACSIMILE: 727 823-6781

St. Petersburg, Florida 33701