

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90036 034 ***150.00

DOCUMENT # 328577
 1. Entity Name
SEGURO, INC.

Principal Place of Business P.O. BOX 2197 FORT MYERS FL 33902 US	Mailing Address P.O. BOX 2197 FORT MYERS FL 33902-2197 US
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2. Principal Place of Business PO-DRAWER 1688 Suite, Apt. #, etc.	3. Mailing Address PO-DRAWER 1688 Suite, Apt. #, etc.
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City & State FT. MYERS FL	City & State FT. MYERS FL	4. FEI Number 59-1207020	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
Zip 33902	Country USA	Zip 33902	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
PLEDGER, ANNA MARIE
1530 MORENO AVENUE
FORT MYERS FL 33901

7. Name and Address of New Registered Agent
 Name **SAME**
 Street Address (P.O. Box Number is Not Acceptable)
7605 Fieldstone Ct
 City **FT MYERS** **FL** Zip Code **33917**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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, 2000 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	P	<input type="checkbox"/> Delete
NAME	PLEDGER, ANNA MARIE	
STREET ADDRESS	YACHT BASIN, EDWARDS DR	
CITY-ST-ZIP	FT MYERS, FL 0	
TITLE	V	<input type="checkbox"/> Delete
NAME	PLEDGER, JOSEPH N.	
STREET ADDRESS	YACHT BASIN, EDWARDS DR	
CITY-ST-ZIP	FT MYERS, FL 00000	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PLEDGER, JULIA A.	
STREET ADDRESS	YACHT BASIN, EDWARDS DR	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PLEDGER, JAMES JR	
STREET ADDRESS	YACHT BASIN, EDWARDS DR	
CITY-ST-ZIP	FT. MYERS FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
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: *Julia A. Pledger* **For Sec** Date 2/14/00 Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR