

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 489463

1. Entity Name

COLORADO BOXED BEEF CO.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90055 040 ***150.00

Principal Place of Business

Mailing Address

302 PROGRESS ROAD
AUBURNDALE FL 33823

302 PROGRESS ROAD
AUBURNDALE FL 33823-2711

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

WINTER HAVEN FL.

Zip

Country

Zip

Country

33882

U.S.

4. FEI Number

59-1634808

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

SATERBO, BRYAN N
4 BRIDGEWATER DR
WINTER HAVEN FL 33884

Name

BRYAN N. SATERBO

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

302 PROGRESS ROAD

City

AUBURNDALE

FL

Zip Code

33823

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

Bryan N. Saterbo

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE SD
NAME SATERBO, JOHN M
STREET ADDRESS 2913 PLANTATION RD.
CITY-ST-ZIP WINTER HAVEN FL 33884

☐ Delete

TITLE VD
NAME SATERBO, STEPHEN C
STREET ADDRESS 3112 POST OAK
CITY-ST-ZIP WINTER HAVEN, FL 00000

☐ Delete

TITLE VTD
NAME SATERBO, BRYAN N
STREET ADDRESS 4 BRIDGEWATER DR.
CITY-ST-ZIP WINTER HAVEN, FL 00000

☐ Delete

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Bryan N. Saterbo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-00

Date

941/967-0636

Daytime Phone #

CR2E034 (9/99)