## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 665188** Apr 12, 2000 8:00 am Secretary of State 1. Entity Name STOR-ALL REALTY AND PROPERTY MANAGEMENT. INC. 04-12-2000 90069 013 \*\*\*158.75 Mailing Address Principal Place of Business 1375 W. HILLSBORO BLVD 1375 W. HILLSBORO BLVD C/O LARRY W. ANDERSON C/O LARRY W. ANDERSON DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442-1719 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite. Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-1990630 Not Applicable Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ANDERSON, LARRY W. Street Address (P.O. Box Number is Not Acceptable) 1375 W. HILLSBORO BLVD DEERFIELD BEACH FL 33442 Zip Code City FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE TITLE ☐ Delete ANDERSON, LARRY W. MAME NAME 1375 W. HILLSBORO BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DEERFIELD BEACH FL CITY-ST-ZIP ☐ Addition Change TITLE ☐ Defete TITLE ANDERSON, JEFFREY M. NAME NAME 1375 W. HILLSBORO BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-7IP DEERFIELD BCH FL CITY-ST-ZIP ☐ Addition Delete TITLE Change TITI F ANDERSON, NORMAN E. NAME NAME STREET ADDRESS 1375 W. HILLSBORO BLVD. STREET ADDRESS CITY-ST-ZIP DEERFIELD BCH FL CITY-ST-ZIP ☐ Addition TITLE Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

3. 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 profile 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:** 

SIGNATURE AND TYPER OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

Date (954) 421-7888

Daytime Phone #