

2001, UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90176 029 ****61.25

DOCUMENT # 768919

1. Entity Name

4139 MANAGEMENT, INC.

Principal Place of Business

4139 S ATLANTIC AVE
NEW SMYRNA BEACH FL 32169
US

Mailing Address

4139 S ATLANTIC AVE
NEW SMYRNA BEACH FL 32169
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2334672

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SACHS MELYNDA
4139 S ATLANTIC AVENUE
NEW SMYRNA BEACH FL 32169

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME ABBOTT, RAYMOND
STREET ADDRESS UNIT #B601, 4139 S. ATLANTIC AVE.
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE P
NAME Alexander, Don
STREET ADDRESS Unit #B701, 4139 S. Atlantic Ave.
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☒ Change ☐ Addition

TITLE S
NAME BRADBURY, LEE
STREET ADDRESS UNIT #B703 4139S ATLANTIC AVE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☒ Delete

TITLE S
NAME Sando, Vincent
STREET ADDRESS Unit # A406, 4139 S. Atlantic Ave
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☒ Change ☐ Addition

TITLE D
NAME JINCENT, SANDY
STREET ADDRESS UNIT #A406, 4139 S ATLANTIC AVE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE D
NAME Abbott, Raymond
STREET ADDRESS Unit # 601, 4139 S. Atlantic Ave.
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☒ Change ☐ Addition

TITLE VP
NAME WEISS, TOM
STREET ADDRESS UNIT #A207, 4139 S. ATLANTIC AVE.
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE D
NAME Craft, Arthur
STREET ADDRESS Unit #B707, 4139 S. Atlantic Ave.
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☐ Change ☒ Addition

TITLE T
NAME BOYDSTON, KENNETH
STREET ADDRESS 265 SHADY OAKS CIR
CITY-ST-ZIP LAKE MARY FL 32746 ☐ Delete

TITLE D
NAME White, Ward
STREET ADDRESS Unit # B404, 4139 S. Atlantic Ave.
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☐ Change ☒ Addition

TITLE D
NAME ALEXANDER, DON
STREET ADDRESS UNIT #B701 4139 S ATLANTIC AVE
CITY-ST-ZIP NEW SMYRNA BEACH FL 32169 ☐ Delete

TITLE D
NAME Sachs, Melynda
STREET ADDRESS 51 Richmond Dr.
CITY-ST-ZIP New Smyrna Beach, FL 32169 ☐ Change ☒ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Melynda Sachs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/01

(904) 428-5691

CR2E037 (10/00)