

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F30734

1. Entity Name

SOUTHEASTERN STAFFING, INC.

FILED

May 26, 2000 8:00 am
Secretary of State

05-26-2000 90287 049 ***150.00

Principal Place of Business

Mailing Address

225 W. BUSCH BLVD.
TAMPA FL 33612

225 W. BUSCH BLVD.
TAMPA FL 33612-7945

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2084282

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

DAVIS PAUL C.ESQ
ONE HARBOUR PLACE
5TH FLOOR
TAMPA FL 33602

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

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 PD
NAME CONNLEY, GEORGE W
STREET ADDRESS 215 CITATION ROAD
CITY-ST-ZIP SPRING HILL FL ☒ Delete

TITLE C
NAME SAUNDERS, RON ☐ Change ☒ Addition
STREET ADDRESS 14142 DENVER W. PKWAY
CITY-ST-ZIP GOLDEN, COLORADO 80401

TITLE DV
NAME TITUS, DANIEL L
STREET ADDRESS 18709 PEPPER PIKE
CITY-ST-ZIP LUTZ FL ☒ Delete

TITLE P
NAME PENDREY, THOMAS ☐ Change ☒ Addition
STREET ADDRESS 225 W. BUSCH BLVD
CITY-ST-ZIP TAMPA, FLA 33612

TITLE ST
NAME ROBERT A. CUSMANO ☒ Delete
STREET ADDRESS 225 W. BUSCH BLVD
CITY-ST-ZIP TAMPA FL

TITLE ST
NAME MIES BAUGH, JEROME ☐ Change ☒ Addition
STREET ADDRESS 225 W. BUSCH BLVD
CITY-ST-ZIP TAMPA, FLA 33612

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/06/00 (813) 935-2000