

# 2000 UNIFORM BUSINESS REPORT (UBR)

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

02-22-2000 90016 035 \*\*\*150.00

**DOCUMENT # H50680**

1. Entity Name  
**STRAIGHT LINE SERVICES, INC.**

**813616**



DO NOT WRITE IN THIS SPACE

|  |  |
|--|--|
| Principal Place of Business<br>JANE LEE BURNS<br>6TH AVE W<br>FL 34205 | Mailing Address<br>C/O JANE LEE BURNS<br>1505 6TH AVE W<br>BRADENTON FL 34205-6704 |
|--|--|

|  |  |
|--|--|
| 2. Principal Place of Business<br>Suite, Apt. #, etc.<br>City & State<br>Zip | 3. Mailing Address<br>Suite, Apt. #, etc.<br>City & State<br>Zip |
|--|--|

|   |  |
|---|--|
| 4. FEI Number<br><b>59-2594329</b>                        | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required                  |

6. Name and Address of Current Registered Agent

**BURNS, JANE LEE**  
**1505 6TH AVE W**  
**BRADENTON FL**

7. Name and Address of New Registered Agent

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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

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

**OFFICERS AND DIRECTORS**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

| ADDRESS<br>ST-ZIP  | Delete <input type="checkbox"/> | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | Change <input type="checkbox"/> Addition <input type="checkbox"/> |
|--|---------------------------------|--|---|
| PSD<br>BURNS, ROBERT LINDELL<br>1911 79TH ST. N.W.<br>BRADENTON FL | <input type="checkbox"/>        |  |   |
| VTD<br>BURNS, JANE LEE<br>1911 79TH ST., N.W.<br>BRADENTON FL      | <input type="checkbox"/>        |  |   |
|  | <input type="checkbox"/>        |  |   |
|  | <input type="checkbox"/>        |  |   |
|  | <input type="checkbox"/>        |  |   |
|  | <input type="checkbox"/>        |  |   |

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: *Jane Lee Burns*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/16/2000* *941-746-6117*  
 Date Daytime Phone #

CR2E034 (9/99)