

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M80108

1. Entity Name
NATIONAL OUTDOOR FURNITURE, INC.

FILED
Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90090 001 ***150.00

Principal Place of Business

608A 17TH STREET E
PALMETTO FL 34221
US

Mailing Address

P.O. BOX 332
PARRISH FL 34221
US

2. Principal Place of Business

616 E 17th Street E
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Palmetto FL.

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0058599

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

EVANS, DONALD RAY
3216 STAGE COACH TRAIL
WIMAUMA FL 33598

7. Name and Address of New Registered Agent

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, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
EVANS, DONALD RAY
6003-17TH ST E
BRADENTON FL

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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☐ 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD R. EVANS (Pres.)

Date

4/5/01 / 813-642-9307

Daytime Phone #

CR2E034 (10/00)