2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2001 8:00 am
Secretary of State
03-02-2001 90110 043 ***150.00

723506

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000036259

1. Entity Name
PAYNE AND BUNN LAND SURVEYORS, INC. ✓

Principal Place of Business
211 LIVE OAK STREET
NEW SMYRNA BEACH, FL 32168

Mailing Address
SAME

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: 59-3655846 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BERRY JOE PAYNE
4255 BOY SCOUT CAMP ROAD
NEW SMYRNA BEACH, FL 32168

7. Name and Address of New Registered Agent

Name: BERRY JOE PAYNE
Street Address (P.O. Box Number is Not Acceptable): 211 LIVE OAK STREET
City: NEW SMYRNA BEACH **FL** Zip Code: 32168

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 X [signature] BERRY JOE PAYNE, PRESIDENT X 02/23/2001
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

Field	Entry	Delete
TITLE	D	☐ Delete
NAME	BERRY JOE PAYNE	
STREET ADDRESS	4255 BOY SCOUT CAMP ROAD	
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32168	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

Field	Entry	Change	Addition
TITLE	D/P/S	☒ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	D/VP/T	☐ Change	☒ Addition
NAME	JAMES M BUNN		
STREET ADDRESS	4384 S. SEA MIST		
CITY-ST-ZIP	NEW SMYRNA BEACH, FL 32169		
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		☐ Change	☐ Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

CR2E034 (11/00)

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: X [signature] BERRY JOE PAYNE X 02/23/2001 (904) 424-1664
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #