

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000040774

1. Entity Name

SUMCARLOS, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90125 014 ***150.00

901087



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

14860 SIX MILE CYPRESS PARKWAY
FT MYERS FL 33912

14860 SIX MILE CYPRESS PARKWAY
FT MYERS FL 33912-4406

2. Principal Place of Business

5571 HALIFAX AVE.

Suite, Apt. #, etc.

3. Mailing Address

5571 HALIFAX AVE.

Suite, Apt. #, etc.

City & State

Fort MYERS, FL

City & State

Fort MYERS, FL

4. FEI Number

65-0415427

Applied For

Not Applicable

Zip

33912

Country

Zip

33912

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

NOLAND, JOHN A
1715 MONROE ST
FT MYERS FL 33902-0280

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 V
NAME MCNEW, QUINTON B
STREET ADDRESS % 14860 SIX MILE CYPRESS PARKWAY
CITY-ST-ZIP FT MYERS FL 33912 ☐ Delete

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

TITLE P
NAME HUGHES, ROBERT K JR
STREET ADDRESS % 14860 SIX MILE CYPRESS PARKWAY
CITY-ST-ZIP FT MYERS FL 33912 ☐ Delete

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

TITLE ST
NAME INGE, RONALD E
STREET ADDRESS % 14860 SIX MILE CYPRESS PARKWAY
CITY-ST-ZIP FT MYERS FL 33912 ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)