## 2001 UNIFORM BUSINESS REPORT (UBR)

NATURE AND TYPED OR PRINTED NAME OF SIGNING OF

## Mar 27, 2001 8:00 am Secretary of State DOCUMENT # P9400033774 B & E HOUCK ENTERPRISES, INC. 03-27-2001 90013 046 \*\*\*150.00 Mailing Address Principal Place of Business 2982 CURTIS KING BLVD 2982 CURTIS KING BLVD FORT PIERCE FL 34946 FORT PIERCE FL 34946 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0454436 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HOUCK, ERROL Street Address (P.O. Box Number is Not Acceptable) 2982 CURTIS KING BLVD FORT PIERCE FL 34946 Meadowood Drive Zip Code 3495 FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Change ☐ Addition TITLE ☐ Delete TITLE HOUCK, BARBARA J NAME NAME 4007 Meadowood Drive STREET ADDRESS STREET ADDRESS 2982 CURTIS KING BLVD Fort Pierce FL CITY-ST-ZIP CITY-ST-ZIP FORT PIERCE FL 34946 ☐ Addition Change VSD TITLE ☐ Delete TITLE HOUCK, ERROL NAME NAME 4007 Meadowood Drive STREET ADDRESS 2982 CURTIS KING BLVD STREET ADDRESS Fort Pierce, FL 34951 CITY-ST-ZIP CITY-ST-ZIP FORT PIERCE FL 34946 **Addition** ☐ Delete TITLE TITLE Adam Houck NAME NAME 5514 Eagle Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT PIERCE, FL 34951 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7JP 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.

Errol Houck 3/17

FILED