

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000089730**

Entry Name  
**Specialty Moving & Storage, Inc.**

Principal Place of Business  
**935 Gamewell Avenue  
Maitland, FL 32751**

Mailing Address  
**935 Gamewell Avenue  
Maitland, FL 32751**

Principal Place of Business  
**935 Gamewell Ave.**

3. Mailing Address

Suite-Apt-#-etc

Suite-Apt-#-etc

City & State  
**Maitland, FL 32801**

City & State

4. FEI Number  
**59-3537949**

Applied For  
 Not Applicable

Zip  
**32789**

Country  
**USA**

Zip 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

**Regina C. Bowerman  
935 Gamewell Ave.  
Maitland, FL 32751**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reinstating)

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

OFFICERS AND DIRECTORS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
<p><input type="checkbox"/> Delete</p> <p><b>DP</b> <b>Regina C. Bowerman</b> <b>935 Gamewell Ave.</b> <b>Maitland, Florida 32751</b></p>	<p><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p><input type="checkbox"/> Delete</p> <p><b>DV</b> <b>Edward Vedrin</b> <b>935 Gamewell Ave.</b> <b>Maitland, Florida 32751</b></p>	<p><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</p> <p><b>200003364392-3</b> <b>-08/18/00-01061-019</b> <b>***\$550.00 ***\$550.00</b></p>
<p><input type="checkbox"/> Delete</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 604, 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: **Regina C. Bowerman, President**

*Regina C. Bowerman*