(850)487-6013

05/01/01 08:02 Fl. Dept. of State pl

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000093970 1. Entity Name

FLORIDA SURETY BONDS, INC.

Principal Place of Business

Mailing Address

FILED May 18, 2001 8:00 am Secretary of State

05-18-2001 91594 031 ***150.00

222 S WESTMONTE DR - 222 S WESTMONTE DR STE 307 STE 307 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 3				12714-4269		552270					
Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc. Suite # 211 Suite 2				_((DO NOT WRITE IN THIS SPACE					
City & Sta	.te		City & State			4. FEI Number	59-3539774		-	pplied For lot Applicable	
Zip		Country	Zip	Country	1	5. Certificate o	Status Desired		8.75 Ad		<u>_</u>
	6. Name	and Address of Current F	legistered Agent			7. Name and A	ddress of New Re	gistered Ag	jent		J
• • •				Narr	le						7
REICH, JEFFREY W 222 SOUTH WESTMONTE DR					Street Address (P.O. Box Number is Not Acceptable)						
STE	307										1
ALT	amonte sf	PRINGS FL 32714		City		···		FL	Zip Coo	ie	1
9. This corporate fax filing	Signature, typed	or protect name of registered agent and bile to satisfy its intangible and elects to do so.	In the purpose of changing its interpretation in the purpose of changing its interpretatio	Registered Agent # I FEE IS \$14 O Fee will be	gnature required v \$0.00 \$550.00	then reinstating)	ion Campaign Fina Fund Contribution.	OATE		O May Be	
11,		OFFICERS AND D	RECTORS	12.		ADDITIONS/CI	HANGES TO OFFIC	ERS AND D	IRECTOR	S IN 11	1
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TITLE			☐ Delete	TITLE					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.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

NAME

Delete

☐ Change

Addition

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2001 UNIFORM BUS		RT (UBR)	Document						
DOCUMENT # \$ \$98000093970 P98000093970									
Florida Surety E	sonds, Inc.	V							
Principal Place of Business 222 S. Westmonte Drive Suite # 211	Mailing Address 2225. Wester Suite #211 Alternate	onte Drive corings FL	552270						
Altamonte Springs, PC 3	थांप	32714							
2. Principal Place of Business	3. Mailing Address								
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE						
City & State	City & State		4. FEI Number 59 - 3539774	Applied For Not Applicable					
Zip Country	Zip=	Country		B.75 Additional be Required					
6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Ag						
Jeffrey W. Reich		Name	Name						
122 C-Westmonte	٧,	Street Address	(P.O. Box Number is Not Acceptable)						
Suite #211									
Altemente Springs P	L 32714	City FL Zip Code							
8. The above named entity submits this statement fo		gistered office or register	red agent, or both, in the State of Florida.						
SIGNATURE JERRY TOCK									
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150:00 10. Election Campaign Financing \$5.00 May Be									
(See criteria on back)	Meke Check Payable	20 - 00 to 10 to 1		Added to Fees					
11. OFFICERS AND THE Teffrey W. Reic		12.	ADDITIONS/CHANGES TO OFFICERS AND D	Change Addition					
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SIGNATURE: Je ALL	Poul		5/1/01 407-78	6-7770					
	INTED NAME OF SIGNING OFFICER OR	DIRECTOR	Dote Days	me Phone #					