2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V46539

FILED
Apr 07, 2000 8:00 am
Secretary of State
04-07-2000 90048 009 ***150.00

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DO NOT WRITE IN THIS SPACE

1. Entity Name
All Florida Realty & Auction Co.

Principal Place of Business | Mailing Address

2. Principal Place of Business
4303 1st St E
Suite, Apt. #, etc.
313
City & State
Bradenton Fl
Zip 34208 Country USA

3. Mailing Address
3401 Wilderness Blvd W
Suite, Apt. #, etc.
City & State
Parrish Fl
Zip 34219 Country USA

4. FEI Number
65-0343000
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
Brian M. Herron
3401 Wilderness Blvd W
Parrish. Fl 34219

7. Name and Address of New Registered Agent
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 NAME STREET ADDRESS CITY-ST-ZIP	President Brian M Herron 3401 Wilderness Blvd W Parrish. Fl 34219 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sect. - Tres. Dianna C. Herron 3401 Wilderness Blvd W Parrish. Fl 34219 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

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: Brian M Herron — 3/28/00 — 941 756-5355 / 941 776-0375
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #