

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 08, 2000 8:00 am
Secretary of State

06-08-2000 90002 044 ***150.00

DOCUMENT # V66664
1. Entity Name
FLORIDA GREETERS, INC. ✓

Principal Place of Business Mailing Address
Florida Greeters
6300 N. Wickham Road, # 130-222
Melbourne, FL 32940

2. Principal Place of Business 3. Mailing Address
6300 N. WICKHAM ROAD 6300 N. WICKHAM ROAD
Suite, Apt. #, etc. Suite, Apt. #, etc.
130-222 130-222

DO NOT WRITE IN THIS SPACE

City & State City & State
MELBOURNE, FL MELBOURNE, FL
Zip Country Zip Country
32940 32940

4. FEI Number Applied For
65-0364372 Not Applicable

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

6. Name and Address of Current Registered Agent
Lee Rosenkranz
6300 N. WICKHAM ROAD
130-222
MELBOURNE, FL 32940

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	PRESIDENT ☐ Delete		TITLE	☐ Change ☐ Addition	
NAME	LEE ROSENKRANZ		NAME		
STREET ADDRESS	1111 JAY PLACE		STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE, FL 32940		CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
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TITLE	☐ Delete		TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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:  Lee Rosenkranz 5/3/00 321-259-6900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)