

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2000 8:00 am
Secretary of State

06-27-2000 90003 041 ****70.00

DOCUMENT # **1199000004935**

1. Entity Name

Resource Depot, Inc. ✓

Principal Place of Business

Not established

Mailing Address *on file w/ Division*

PO Box 13146
North Palm Beach, FL
33408-7146

2. Principal Place of Business

3. Mailing Address

PO Box 30295

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Palm Beach Gardens, FL

4. FEI Number

65-0964759

Applied For

Not Applicable

Zip

Country

Zip
33420

Country
U.S.A.

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Galen Morris S. Elker, Weinberger,
& Wolmer,
712 U.S. Hwy One, Suite 400
PO Box 13146
North Palm Beach, FL 33408-7146

7. Name and Address of New Registered Agent

Name **Moyle, Flanigan, Katz, Collins, Raymond & Sheehan, P.A.**
 Street Address (P.O. Box Number is Not Acceptable)
625 N. Flagler Drive
9th Floor
 City **West Palm Beach** **FL** Zip Code **33407**

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.

Moyle, Flanigan, Katz, Collins, Raymond & Sheehan, P.A.

SIGNATURE

Thomas A. Sheehan III

6/6/00

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	V/D	<input checked="" type="checkbox"/> Delete
NAME	Jana Haskins	
STREET ADDRESS	7501 N. Jog Rd	
CITY-ST-ZIP	West Palm Beach, FL 33412	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	Kathleen E. Kelley	
STREET ADDRESS	7501 N. Jog Rd	
CITY-ST-ZIP	West Palm Beach, FL 33412	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	Russ Ketchum	
STREET ADDRESS	2455 Port West Blvd Bldg A	
CITY-ST-ZIP	Riviera Beach, FL 33407	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kimberly Ray	
STREET ADDRESS	114 N. 1st Street	
CITY-ST-ZIP	Lake Worth, FL 33460	
TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Janice Carlin	
STREET ADDRESS	102 B Harvest Moon Ct	
CITY-ST-ZIP	Jupiter, FL 33458	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Keith Hurbs	
STREET ADDRESS	116 Malaga St.	
CITY-ST-ZIP	Royal Palm Beach, FL 33411	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John Williams	
STREET ADDRESS	7501 N. Jog Rd	
CITY-ST-ZIP	West Palm Beach, FL 33412	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mary McGee	
STREET ADDRESS	301 N. Olive Ave Room 1002 10th Floor	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5/23/00 561 655 1010
X172

CR2E037 (9/99)