

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 133485

1. Entity Name

THEO INVESTMENT COMPANY, INC.

FILED

Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90005 007 ***150.00

Principal Place of Business

Mailing Address

2576 SE 32ND PLACE
OCALA FL 34471-6874
US

2576 SE 32ND PLACE
OCALA FL 34481-6525

2. Principal Place of Business

3. Mailing Address

9576-A S.W. 89th CT. RD.
Suite, Apt. #, etc.

9576-A S.W. 89th CT. RD.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
OCALA, FL
Zip
34481-6525
Country

City & State
OCALA, FL
Zip
34481-6525
Country

4. FEI Number 59-0860238

Applied For
Not Applicable

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

CONSTANTINE, GREGORY JR
2576 SE 32ND PLACE
OCALA FL 34471-6874

Name

Street Address (P.O. Box Number is Not Acceptable)

9576-A S.W. 89th COURT ROAD

City
OCALA

FL

Zip Code
34481-6874

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 Gregory Constantine Jr.
Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

February 1, 2000
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 S ☐ Delete
NAME CONSTANTINE, BARBARA
STREET ADDRESS 2576 SE 32ND PL
CITY-ST-ZIP Ocala FL

TITLE ☒ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS 9576-A S.W. 89th COURT ROAD
CITY-ST-ZIP Ocala, FL 34481-6874

TITLE TD ☐ Delete
NAME HARROLD, CAROL
STREET ADDRESS 5133 S GREENWOOD #1
CITY-ST-ZIP CHICAGO IL

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD ☐ Delete
NAME CONSTANTINE, KENNETH B
STREET ADDRESS 28 MASCOMA STREET
CITY-ST-ZIP QUINCY MA

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE PD ☐ Delete
NAME CONSTANTINE, GREGORY JR.
STREET ADDRESS 2576 SE 32ND PLACE
CITY-ST-ZIP Ocala FL

TITLE ☒ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS 9576-A S.W. 89th COURT ROAD
CITY-ST-ZIP Ocala, FL 34481-6525

TITLE ☐ Delete
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ 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.

SIGNATURE: Gregory Constantine Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GREGORY CONSTANTINE JR

Date

Daytime Phone #

February 1, 2000

(352) 873-6072

CR2E034 (9/99)