

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 150073

1. Entity Name

RUEBEL INVESTMENTS, INC.

FILED
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 90040 037 ***150.00

Principal Place of Business

Mailing Address

4005 WEST SAN JUAN ST
TAMPA FL 33629
US

P.O. BOX 130367
TAMPA FL 33681
US

2. Principal Place of Business

204 37th Ave N #358

3. Mailing Address

204 37th Ave N #358

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg FL

City & State

St. Petersburg FL

Zip
33704

Country
US

Zip
33704

Country
US

4. FEI Number

59-0568213

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STOBBS, BARBARA J
4005 WEST SAN JUAN ST
TAMPA FL 33629

7. Name and Address of New Registered Agent

Name BRELON HILL

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

2401 FIFTH AVE NORTH

City ST PETERSBURG

FL

Zip Code 33713

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

Brelon Hill

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2-8-01

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, 2001 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

TITLE PD
NAME RUEBEL JR, CHARLES G
STREET ADDRESS 721 NW MEADOWOOD CIR
CITY-ST-ZIP MCMINNVILLE OR 99128 ☐ Delete

TITLE TD
NAME RUEBEL, ROBERTA B
STREET ADDRESS 721 NW MEADOWOOD CIR
CITY-ST-ZIP MCMINNVILLE OR 99128 ☐ Delete

TITLE VSD
NAME STUBBS, BARBARA J
STREET ADDRESS 4005 W SAN JUAN ST
CITY-ST-ZIP TAMPA FL 33629-6717 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VSD ☒ Change ☐ Addition
NAME RUEBEL, ROBERTA B
STREET ADDRESS 721 NW MEADOWOOD CIRCLE
CITY-ST-ZIP MCMINNVILLE OR 97128

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

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

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

TITLE
NAME
STREET ADDRESS
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:

Charles G Ruebel JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
President

2/21/01

Date

503 472-6956

Daytime Phone #

CR2E034 (10/00)