

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

240613

1. Entity Name

CONRAD YELVINGTON DISTRIBUTORS, INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business

2326 Bellevue Avenue

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32114

Country

USA

3. Mailing Address

P.O. Box 1686

Suite, Apt. #, etc.

City & State

Daytona Beach, FL

Zip

32115

Country

USA

4. FEI Number

59-0908399

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Yelvington, Conrad  
800 Big Tree Road  
Daytona Beach, FL 32019

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

TITLE	D	<input type="checkbox"/> Delete
NAME	Yelvington, Conrad	
STREET ADDRESS	800 Big Tree Road	
CITY-ST-ZIP	South Daytona, FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	Yelvington, Margaret	
STREET ADDRESS	800 Big Tree Road	
CITY-ST-ZIP	South Daytona, FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	Yelvington, Darlene	
STREET ADDRESS	800 Big Tree Road	
CITY-ST-ZIP	South Daytona, FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	Yelvington, Susan	
STREET ADDRESS	800 Big Tree Road	
CITY-ST-ZIP	South Daytona, FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	Gary Yelvington	
STREET ADDRESS	800 Big Tree Road	
CITY-ST-ZIP	South Daytona, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2326 Bellevue Avenue	
STREET ADDRESS	Daytona Beach, FL 32114	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2326 Bellevue Avenue	
STREET ADDRESS	Daytona Beach, FL 32114	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2326 Bellevue Avenue	
STREET ADDRESS	Daytona Beach, FL 32114	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

*Mr. M. Yelvington*

TREASURER

5/3/00

904-257-5504

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)