

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State
 02-28-2001 90048 012 ***150.00

DOCUMENT # 299884

1. Entity Name
WAR CO OF RUSKIN INC

Principal Place of Business
**505 NORTH TAMiami TRAIL
 RUSKIN FL 33570**

Mailing Address
**505 NORTH TAMiami TRAIL
 RUSKIN FL 33570**

010040

2. Principal Place of Business
Ruskin
 Suite, Apt. #, etc.

3. Mailing Address
505 N TAMiami
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Ruskin
 Zip
33570
 Country
Hills

City & State
FLA
 Zip
33570
 Country
Hills

4. FEI Number **59-1118344**
 Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**TANNER, ROBERT
 505 N TAMiami TRAIL
 RUSKIN FL**

7. Name and Address of New Registered Agent

Name **Robert C TANNER**
 Street Address (P.O. Box Number is Not Acceptable)
505 N TAMiami
Ruskin FL 33570
 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 **Robert C TANNER** DATE **2-24-01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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** ☐ Delete
 NAME **TANNER, ROBERT**
 STREET ADDRESS **4004 ZELAR STREET**
 CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ Delete
 NAME **TANNER, JOSEPHINE**
 STREET ADDRESS **4004 ZELAR STREET**
 CITY-ST-ZIP **TAMPA FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
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 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: **Robert C TANNER** DATE **2-24-01** DAYTIME PHONE # **813 6451494**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)