## 2001 UNIFORM RUSINESS REDORT (URB)

2001 UNIFORM BUSINESS REPORT (UBR)  DOCUMENT # 338164  1. Entity Name MONROE ENTERPRISES INC						FILED Apr 04, 2001 8:00 am Secretary of State 04-04-2001 90093 045 ***150.00				
		<del></del>	4.	•		,	7 - 0 - 2001 90	1.000	70.00	
Principal Pla 13500 US 19 I CLEARWATER US		Mailing Address 13500 US 19 N CLEARWATER FL 33764 US						93	865	<b>5</b> 6
2. Principal	Place of Business	3. Mailing Address								
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.					DO NOT WRIT	E IN THIS SPACE		
City & Sta	ate	City & State				4. FEI Number	59-1226704		Applied	d For
Zip Country		Zip Coun		ntry		5. Certificate of	Status Desired	□ \$8.75	Addition	
	6. Name and Address of Current R	egistered Agent	·-	Name		7Name and A	Idress of New Ro	gistered Agent—		
1350	NROE, EDWIN P III DO US 19 N ARWATER FL 33764	Street			dress (P.	ss (P.O. Box Number is Not Acceptable)				
ÇLL	ARMATER PC 35704			City	<del></del>			FL Zip	Code	
8. The above	e named entity submits this statement for	the purpose of changing its	register	ed office or r	egistered	agent, or both,	in the State of Flor			
SIGNATURE	Signature, typed or printed name of registered agent an	d title if explicable (NOT	- Conintor	d Agent signature				DATE		_
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW! After MAY 1, 20 Make Check Payab	!! FEE 01 Fee	IS \$150.00 will be \$55	00.00	10. Election	on Campaign Fina Fund Contribution	ncing _ \$	5.00 Ma	
11.	OFFICERS AND D	<u> </u>	12.			ADDITIONS/CH	ANGES TO OFFIC	ERS AND DIREC	ORS IN 1	11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAUGHN, FERRELL 2271 KEYSTONE RD TARPON SPRINGS, FL 00000			E Et address -ST-Zip	<b></b> -			☐ Cha	ige 🗀	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONROE, EDWIN P III 14280 SIESTA RD LARGO FL	☐ Delete						☐ Cha	ige 🔲	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VAN GELDER, LARRY W 9600 OAK ST., N.E. ST. PETERSBURG FL	_ Delete		1			-	☐ Cha	ige . 🗌	Addition.
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete		- 1				☐ Cha	ige 🗍	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAMI STRE					☐ Chai	ige 🗌	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STRE				- N	☐ Chai	ge 🗆	Addition
of the cor	certify that the information supplied with the on this report or supplemental report is the poration or the receiver or trustee empower, or on an attachment with an address, wij	ue and accurate and that me ered to execute this report :	ıv sianat	ure shali hav	e the sar	ne legal effect as	: if made under oa	th: that I am an of	icer or dir	rector