

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 395328

1. Entity Name

NORTH POLK CARETAKING, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90067 016 ***150.00

Principal Place of Business

225 EAST STUART AVE
LAKE WALES FL 33853
US

Mailing Address

PO BOX 1079
LAKE WALES FL 33859-1079
US

2. Principal Place of Business

3. Mailing Address
PO Box 1410

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Lake Wales, FL

Zip

Country

Zip
33859-1410

Country

USA

4. FEI Number

59-1378970

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

MYERS, C.B., III
130 E. CENTRAL AVENUE
LAKE WALES FL 33853

Name
MYERS, C. B. III

Street Address (P.O. Box Number is Not Acceptable)
122 E Tillman Avenue (New Address)

City
Lake Wales

FL

Zip Code
33853

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
MYERS, C.B., III
130 E. CENTRAL AVENUE
LAKE WALES FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
MYERS, C. B. III
122 E Tillman Avenue
Lake Wales, FL 33853 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CRAIG, MICHAEL
130 E. CENTRAL AVENUE
LAKE WALES FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
CRAIG, MICHAEL
122 E Tillman Avenue
Lake Wales, FL 33853 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C. B. Myers III April 7, 2000 863/676-0521

Date

Daytime Phone #

CR2E034 (9/99)