

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 427843

1. Entity Name

ROGERS' ENTERPRISES OF SOUTHWEST FLORIDA, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90033 016 ***150.00

Principal Place of Business

Mailing Address

13131 HICKORY GROVE CT
 FT MYERS FL 33905
 US

13131 HICKORY GROVE CT
 FT MYERS FL 33905-5801
 US

2. Principal Place of Business

3. Mailing Address

15198 SAM SNEAD LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

N. FORT MYERS, FL

Zip

Country

Zip

Country

33917

US

4. FEI Number

59-1670197

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROGERS, CARL JAMES
 13131 HICKORY GROVE CT
 FT MYERS FL 33905

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete

NAME ROGERS, CARL JAMES
 STREET ADDRESS 13131 HICKORY GROVE CT
 CITY-ST-ZIP FT MYERS FL 33905

TITLE ☒ Change ☐ Addition

NAME 15198 SAM SNEAD LN
 STREET ADDRESS N. FT MYERS FL 33917
 CITY-ST-ZIP

TITLE VP ☐ Delete

NAME ROGERS, NORA JUANITA
 STREET ADDRESS 13131 HICKORY GROVE CT
 CITY-ST-ZIP FT MYERS FL 33905

TITLE ☒ Change ☐ Addition

NAME 15198 SAM SNEAD LN
 STREET ADDRESS N. FT MYERS FL 33917
 CITY-ST-ZIP

TITLE ST ☐ Delete

NAME ROGERS, TUNIS GRACE
 STREET ADDRESS 13131 HICKORY GROVE CT
 CITY-ST-ZIP FT MYERS FL 33905

TITLE ☒ Change ☐ Addition

NAME 15198 SAM SNEAD LN
 STREET ADDRESS N. FT MYERS FL 33917
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Carl J. Rogers
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-00

Date

941 5671326

Daytime Phone #

CR2E034 (9/99)