

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 455646

1. Entity Name

FREELAND DISTRIBUTORS, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90080 046 ***158.75

Principal Place of Business

18051 S. TAMiami TRAIL
 FORT MYERS FL 33908
 US

Mailing Address

13880 S TAMiami TRAIL
 FT. MYERS FLORIDA 33912-1628
 US

2. Principal Place of Business

PO Box 110729

3. Mailing Address

PO Box 110729

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES FL

City & State

NAPLES FL

4. FEI Number

59-1579908

Applied For

Not Applicable

Zip

Country

34108-0113

USA

Zip

Country

34108-0113

USA

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

FREELAND, BERNARD G
 13880 S. TAMiami TRAIL
 FT. MYERS FL 33912

Name

BERNARD G FREELAND

Street Address (P.O. Box Number is Not Acceptable)

92 MURTLE RD

City

NAPLES

FL

Zip Code

34108

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 PVS
 NAME FREELAND, GEORGE ☐ Delete
 STREET ADDRESS 13880 S TAMiami TRAIL
 CITY-ST-ZIP FT. MYERS FL

TITLE
 NAME FREELAND, George T ☒ Change ☐ Addition
 STREET ADDRESS 813 CAI Cove Dr
 CITY-ST-ZIP FT MYERS, FL 33919

TITLE T
 NAME FREELAND, GEORGE ☐ Delete
 STREET ADDRESS 13880 S TAMiami TRAIL
 CITY-ST-ZIP FT. MYERS FL

TITLE
 NAME FREELAND, George T ☒ Change ☐ Addition
 STREET ADDRESS 813 CAI Cove Dr
 CITY-ST-ZIP FT MYERS, FL 33919

TITLE V
 NAME FREELAND, BERNARD G ☐ Delete
 STREET ADDRESS 13880 S TAMiami TRAIL
 CITY-ST-ZIP FT. MYERS FL 34108

TITLE
 NAME FREELAND, BERNARD G ☐ Change ☐ Addition
 STREET ADDRESS 92 MURTLE RD
 CITY-ST-ZIP Naples, FL 34108

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

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

Date

Daytime Phone #

4/26/00 633-3646

CR2E034 (9/99)