

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 611270

1. Entity Name

BROADCASTERS' GENERAL STORE, INC.

Principal Place of Business

2480 SE 52ND ST
OCALA FL 33480-7500
US

Mailing Address

2480 SE 52ND ST
OCALA FL 34480-7574
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

SHUTE, WILLIAM G.
6106 TOPSAIL CT
LADY LAKE FL 32159

7. Name and Address of New Registered Agent

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

TITLE NAME ☐ Delete
ST
KERSTIN, KERRY
STREET ADDRESS
2480 SE 52ND STREET
CITY-ST-ZIP
OCALA FL

TITLE NAME ☒ Delete
VP
CLARK, KANDY
STREET ADDRESS
5535 SADDLEBACK COURT
CITY-ST-ZIP
LADY LAKE FL

TITLE NAME ☐ Delete
P
KERSTIN, DAVID A.
STREET ADDRESS
2480 SE 52ND STREET
CITY-ST-ZIP
OCALA FL

TITLE NAME ☐ Delete
VD
SHUTE, CHRIS W.
STREET ADDRESS
538 S.W. 48 STREET RD.
CITY-ST-ZIP
OCALA FL

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS
15252 S.E. 140TH AVE. RD.
CITY-ST-ZIP
WIERSDALE, FL 32195

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

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-00

Date

3526227700

Daytime Phone #

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90051 011 ***150.00



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1888397

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required