

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 627112

1. Entity Name

BROOKS, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90088 019 ***150.00

Principal Place of Business

6291 METRO PLANTATION ROAD
FT. MYERS FL 33912
US

Mailing Address

6291 METRO PLANTATION RD.
FT. MYERS FL 33912-1260
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1931789

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROOKS, DONALD E.
6281 METRO PLANTATION RD.
FT MYERS FL 33912

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 \$650.00
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 PD
NAME BROOKS, DONALD E.
STREET ADDRESS 6291 METRO PLANTATION ROAD
CITY-ST-ZIP FT MYERS FL

☐ Delete

TITLE V
NAME HAMAN, MICHAEL A.
STREET ADDRESS 6645 WILLOW LAKE CIRCLE
CITY-ST-ZIP FORT MYERS FL

☒ Delete

TITLE
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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
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CITY-ST-ZIP

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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

DONALD E. BROOKS

22 MARCH 2000 941.9395251

Date

Daytime Phone #

CR2E034 (9/99)