

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 730915

1. Entity Name

WINNIE-GATORS, INC.

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

03-30-2000 90055 017 ****61.25

Principal Place of Business

Mailing Address

6216 HUNTERS LANE
ST AUGUSTINE FL 32092
US

6216 HUNTERS LANE
ST AUGUSTINE FL 32092-2106
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0426845

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

YETTER, DONALD W.
1402 3RD AVE. W.
BRADENTON FL 34205

ADDRESS
CHANGE ONLY →

Name

YETTER, DONALD W.

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

406 THIRTEENTH STREET WEST

City

BRADENTON

FL

Zip Code

34205

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

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME BYERS, MARGARET ☐ Delete
STREET ADDRESS 6228 HUNTERS LANE
CITY-ST-ZIP ST AUGUSTINE FL 32092

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

TITLE IVP
NAME PEARSON, CHARLIE ☐ Delete
STREET ADDRESS 13670 NE 238 CT
CITY-ST-ZIP SALT SPRINGS FL 32134

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

TITLE DT
NAME HOFFREN, CINDY ☐ Delete
STREET ADDRESS 6216 HUNTERS LANE
CITY-ST-ZIP ST AUGUSTINE FL 32092

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

TITLE 2VP
NAME HALSTEAD, PHILIP ☐ Delete
STREET ADDRESS 55 SEMINOLE DR E.
CITY-ST-ZIP BRADENTON FL 34208

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

TITLE TD
NAME HOFFREN, CINDY ☒ Delete
STREET ADDRESS 6216 HUNTERS LANE
CITY-ST-ZIP ST AUGUSTINE FL 32092

TITLE ☒ Change ☐ Addition
NAME SECRETARY
STREET ADDRESS DAWN COSTA
CITY-ST-ZIP 5608 SW 107th STREET
OCALA, FL 34476

TITLE D
NAME VAN VALKENBURG, EDWIN ☐ Delete
STREET ADDRESS 1501 W. LINEBAUGH AVE
CITY-ST-ZIP TAMPA FL 33612

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: CINDY HOFFREN NECCOFFREN, Treas. 3-29-00 904-940-9104

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)