

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 760136

1. Entity Name

THE TALLAHASSEE BACH PARLEY, INC.

Principal Place of Business

1127 VICTORY GARDEN DR
TALLAHASSEE FL 32301

Mailing Address

1127 VICTORY GARDEN DR
TALLAHASSEE FL 32301-3219

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

59-2209177

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

LOUWENAAR, KARYL J.
1127 VICTORY GARDEN DR
TALLAHASSEE FL 32301

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

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 ☐ Delete
NAME LOUWENAAR, KARYL J.
STREET ADDRESS 1127 VICTORY GARDEN DR
CITY-ST-ZIP TALLAHASSEE FL

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

TITLE TD ☐ Delete
NAME APPLGATE, PATRICIA C
STREET ADDRESS 1126 LOTHIAN DR
CITY-ST-ZIP TALLAHASSEE FL

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

TITLE D ☐ Delete
NAME CORZINE, MICHAEL
STREET ADDRESS 2318 VINKARA DR
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☒ Change ☐ Addition
NAME Corzine, Michael
STREET ADDRESS 1105 Kenilworth Rd
CITY-ST-ZIP Tallahassee, FL 32312

TITLE VD ☐ Delete
NAME HAMMOND, GERRY
STREET ADDRESS 2005 OLD FORT DR
CITY-ST-ZIP TALLAHASSEE FL

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

TITLE D ☒ Delete
NAME LEVERENZ, ANDREW
STREET ADDRESS 1014 E 6TH AVE
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ Change ☒ Addition
NAME Hayward, Patricia C.
STREET ADDRESS 3305 Charleston Road
CITY-ST-ZIP Tallahassee, FL 32308

TITLE SD ☒ Delete
NAME CUMMINGS, GEORGE
STREET ADDRESS 1508 RAA AVE
CITY-ST-ZIP TALLAHASSEE FL

TITLE SD ☐ Change ☒ Addition
NAME Roberts, D. Scott
STREET ADDRESS 3007 Shamrock N. #28
CITY-ST-ZIP Tallahassee, FL 32308

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:

Patricia C. Applegate Patricia C. Applegate 2/19/2000 (850) 386-3812
Treasure
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)