

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 852551

1. Entity Name

NORTHLAKE FOODS, INC.

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90016 034 ***150.00

Principal Place of Business

Mailing Address

3424 PEACHTREE RD
STE 2075
ATLANTA GA 30326
US

3424 PEACHTREE RD
STE 2075
ATLANTA GA 30326-2825
US

2. Principal Place of Business

100 West Paces Ferry Rd.

3. Mailing Address

100 West Paces Ferry Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Atlanta, GA 30305

City & State
Atlanta, GA 30305

4. FEI Number
58-1449601

Applied For
Not Applicable

Zip
30305

Country
USA

Zip
30305

Country
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

C T CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
FAUSSEMAGNE, JACK
3424 PEACHTREE RD, STE 2075
ATLANTA GA 30326 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
Faussemagne, Jack
100 West Paces Ferry Rd.
Atlanta, GA 30305 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOHNSON, WILLIAM B
3424 PEACHTREE RD, STE 2075
ATLANTA GA 30326 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Johnson, William B.
100 West Paces Ferry Rd.
Atlanta, GA 30305 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
MARTINDALE, LARRY P
3424 PEACHTREE RD, STE 2075
ATLANTA GA 30326 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
Martindale, Larry P.
100 West Paces Ferry Rd.
Atlanta, GA 30305 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CHAMBERS, RUFUS A
3390 PEACHTREE RD, #450
ATLANTA GA 30326 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SAYLOR, DARYL
5912 BRECKENRIDGE PARKWAY, STE A
TAMPA FL 33610 ☐ 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

Rufus A. Chambers; Secretary

3/27/00 404/816-4070

Date

Daytime Phone #

CR2E034 (9/99)