

# 2000 UNIFORM BUSINESS REPORT (UBR)

0017764 AF

DOCUMENT # A07087

1. Entity Name

REGIONAL ENTERPRISES, LTD.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAR 20 AM 9:47

3/27/00

Principal Place of Business

1230 AIRPORT ROAD  
DESTIN FL 32541

Mailing Address

P.O. BOX 908  
DESTIN FL 32540-0908

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

58-1353299

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

AVERILL, JERRI  
1230 AIRPORT RD.  
DESTIN FL 32541

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. Capital Contributions  
as Shown on record.

\$46,395.00

10. Amount of Capital Contributions  
in FLORIDA to date.

46,395

11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
CARTER, JOSEPH J JR.  
6524 RAMOTH DRIVE  
JACKSONVILLE FL 32226

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

DOCUMENT #  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDRESS CHANGES ONLY

STREET ADDRESS

1049 SUNSET DRIVE

CITY - ST - ZIP

LAKE WALES FL 33853-4226

STREET ADDRESS

CITY - ST - ZIP

400003198984--7

-04/07/00--01002--002

\*\*\*\*417.75 \*\*\*\*417.75

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

3-10-00

Date

863 676 7338

Daytime Phone #

CR2E003 (9/99)