

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000515

1. Entity Name

ALMANAC USA.COM INC.

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90309 008 ***150.00

0006728

Principal Place of Business

C/O OCEAN WALK PROPERTIES
326 N. ATLANTIC AVE.
DAYTONA BEACH FL 32118

Mailing Address

C/O OCEAN WALK PROPERTIES
326 N. ATLANTIC AVE.
DAYTONA BEACH FL 32118

040443



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

C/O Ocean Walk Properties
Suite, Apt. #, etc.
300 N. Atlantic Avenue

3. Mailing Address

C/O Ocean Walk Properties
Suite, Apt. #, etc.
300 N. Atlantic Avenue

City & State

Daytona Beach, FL

City & State

Daytona Beach, FL

Zip

32118

Country

USA

Zip

32118

Country

USA

4. FEI Number

59-3613850

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FINCKE, GERALD B
326 N. ATLANTIC AVE
DAYTONA BEACH FL 32118

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, 2001 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

TITLE	V	<input type="checkbox"/> Delete
NAME	HERMANN, BRUCE	
STREET ADDRESS	360 PELICAN AVENUE	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	ROBERTS, KEVIN	
STREET ADDRESS	8 TORREY PINES COURT	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	FINCKE, GERALD B.	
STREET ADDRESS	978 BREEZEMONT COURT	
CITY-ST-ZIP	PORT ORANGE FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	MCDONALD, MARK	
STREET ADDRESS	105 JUBILEE CIRCLE	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	CD	<input type="checkbox"/> Delete
NAME	MCNEIL, GORDON H	
STREET ADDRESS	44 OAK MEADOW TRAIL	
CITY-ST-ZIP	PITTSFORD NY	
TITLE	D	<input type="checkbox"/> Delete
NAME	ANDERSON, GEORGE O	
STREET ADDRESS	3010 PENINSULA DRIVE	
CITY-ST-ZIP	DAYTONA BEACH FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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

March 21, 2001

904-257-5077

Daytime Phone #

CR2E034 (10/00)