

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000005842

1. Entity Name

NEW ERA PARTNERS, INC.

FILED

Jan 29, 2001 8:00 am  
Secretary of State

01-29-2001 90046 045 \*\*\*158.75

Principal Place of Business

Mailing Address

1295 TADSWORTH TERRACE  
HEATHROW FL 32746

1295 TADSWORTH TERRACE  
HEATHROW FL 32746

LUU10706



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

286 New Gate Loop  
Suite, Apt. #, etc.

286 New Gate Loop  
Suite, Apt. #, etc.

City & State

City & State

Heathrow, FL

Heathrow, FL

Zip

Country

Zip

Country

32746

Seminole

32746

Seminole

4. FEI Number 11-3245627

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

DEMAKOS, GEORGE P  
1295 TADSWORTH TERRACE  
HEATHROW FL 32746

Name

George P. Demakos

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

286 New Gate Loop

City

Heathrow

FL

Zip Code  
32746

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 George P. Demakos, President

(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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME DEMAKOS, GEORGE P  
STREET ADDRESS 1295 TADSWORTH TERRACE  
CITY-ST-ZIP HEATHROW FL 32746

TITLE President ☒ Change ☐ Addition  
NAME George P. Demakos  
STREET ADDRESS 286 New Gate Loop  
CITY-ST-ZIP Heathrow, FL 32746 ☐ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Delete  
NAME  
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TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 another like empowered.

SIGNATURE:

George P. Demakos, President

Date

Daytime Phone #

407-302-1314

CR2E034 (10/00)