

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0034720 AV

DOCUMENT # F32822

1. Entity Name
FORBESS HOLDINGS, INC.



FILED
CLERK OF THE STATE
DIVISION OF CORPORATION
03 JUN -9 PM 3:53

Principal Place of Business
P O BOX 8815
JACKSONVILLE FL 32239

Mailing Address
P O BOX 8815
JACKSONVILLE FL 32239



2. Principal Place of Business

N/A

3. Mailing Address

WANDA FORBESS

Suite, Apt. #, etc.

Suite, Apt. #, etc.

7263 TRAILS END

City & State

City & State

JACKSONVILLE FL

Zip

Country

Zip

32277

Country

USA

4. FEI Number

59-2115659

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

FORBESS, THOMAS J
558 STUART LANE
JACKSONVILLE FL 32205

7. Name and Address of New Registered Agent

Name

WANDA FORBESS

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

7263 TRAILS END

City

JACKSONVILLE

FL

Zip Code

32277

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Wanda Forbes pres.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
FORBESS, THOMAS J
558 STUART LN
JACKSONVILLE FL 32254

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
FORBESS, RAYMOND E
11737 S WHITE BLUFF DR
JACKSONVILLE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
FORBESS, WANDA
7263 TRAILS END
JACKSONVILLE FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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TITLE
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STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
600020966956
06/18/03--01039--010 **150.00

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ Change ☐ Addition

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 607, 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:

SIGNATURE Wanda Forbes

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/03

Date

904-744-2567

Daytime Phone #

CR2E034 (10/02)

5/1/03

TO WHOM IT MAY CONCERN

PLEASE HELP ME BY MAILING ALL FUTURE
CORRESPONDENCE TO MY HOME ADDRESS. MY 2 SONS
NO LONGER HELP ME WITH THIS PAPERWORK AND I NEED
TO GET ALL MAIL FROM YOUR OFFICE. OUR COMPANY
NO LONGER CONDUCTS NORMAL BUSINESS AS WE DID FOR MANY
YEARS AND THEY DID THIS FOR ME. WE ARE NO
LONGER IN BUSINESS NOW BUT NEED TO LEAVE
THE CORPORATION OPEN TO WIND DOWN OUR
AFFAIRS.

THANK YOU

Wanda Tolbert

904-744-2567

NOTE: WE NO LONGER GET
MAIL AT 8815 (POST OFFICE BOX)
PLEASE SEE CHANGE OF ADDRESS
TO MY HOUSE