

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F94000003195**

1. Entity Name

VERMEER SALES & SERVICE, INCORPORATED**FILED**
Mar 01, 2001 8:00 am
Secretary of State

03-01-2001 91328 038 ***150.00

Principal Place of Business

Mailing Address

PO BOX 9429
BIRMINGHAM AL 35220**PO BOX 9429**
BIRMINGHAM AL 35220

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 **63-0586977**

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

HOWARD, STEPHEN W
6691 MOBILE HWY
PENSACOLA FL 32526

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 State10. 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	CB	<input type="checkbox"/> Delete
NAME	HOWARD, CHARLES T	
STREET ADDRESS	7416 GADSDEN HWY.	
CITY-ST-ZIP	TRUSSVILLE AL 35173	
TITLE	P	<input type="checkbox"/> Delete
NAME	HOWARD, STEPHEN W	
STREET ADDRESS	6691 MOBILE HWY	
CITY-ST-ZIP	PENSACOLA FL 32534	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HOWARD, PATRICIA ANN	
STREET ADDRESS	7416 GADSDEN HWY.	
CITY-ST-ZIP	TRUSSVILLE AL 35173	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HOWARD, R CAROL	
STREET ADDRESS	7931 HAPPY HALLOW RAOD	
CITY-ST-ZIP	TRUSSVILLE AL 35173	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	7961 Wynwood Road	
CITY-ST-ZIP	Trussville, AL 35173	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	7961 Wynwood Road	
CITY-ST-ZIP	Trussville, AL 35173	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	2950 Pinson Valley Pkwy	
CITY-ST-ZIP	Birmingham, AL 35217	
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:

R. Carol Howard, VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/24/01

Date

205-841-9895

Daytime Phone #

CR2E034 (10/00)