

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90062 044 ***150.00

DOCUMENT # F95000001584

1. Entity Name

HERALD HOLDINGS, INC.

Principal Place of Business

Mailing Address

PO BOX 1395
 BOCA GRANDE FL 33921

PO BOX 1395
 BOCA GRANDE FL 33921-1395

624457



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-2665058

Applied For

Not Applicable

Zip

Country

Zip

Country

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

EUWER, PAUL JR
1721 WEST SEVENTEENTH STREET
PO BOX 1395
BOCA RATON FL 33921

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, 2000 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 **PC** ☐ Delete
 NAME **HEALY, LIAM P**
 STREET ADDRESS **1-2 UPPER HATCH STREET**
 CITY-ST-ZIP **DUBLIN, IRELAND**

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

TITLE **VVC** ☐ Delete
 NAME **PARKINSON, JAMES J**
 STREET ADDRESS **1-2 UPPER HATCH STREET**
 CITY-ST-ZIP **DUBLIN, IRELAND**

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

TITLE **VTD** ☐ Delete
 NAME **EUWER, PAUL J**
 STREET ADDRESS **1721 WEST 17TH STREET**
 CITY-ST-ZIP **BOCA GRANDE FL 33921**

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

TITLE **VSD** ☐ Delete
 NAME **HOOPES, EDWARD**
 STREET ADDRESS **1712 JOSE GASBAR DRIVE**
 CITY-ST-ZIP **BOCA GRANDE FL 33921**

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
 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:

Paul Euwer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/00
 Date

941-664-2424
 Daytime Phone #

CR2E034 (9/99)