

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F96000002683

1. Entity Name

PREMUS OF ORLANDO, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90163 007 ***150.00

Principal Place of Business

Mailing Address

1264 MORGAN CHASE DRIVE
MARIETTA GA 30066

1264 MORGAN CHASE DRIVE
MARIETTA GA 30066-5638

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

58-2067773

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

RADER, GARY A
16403 MYERS COURT
CLERMONT FL 34711

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 ☐ Delete

NAME EVANS, PHILLIP C
STREET ADDRESS 1264 MORGAN CHASE DRIVE
CITY-ST-ZIP MARIETTA GA

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME EVANS, ANNE K
STREET ADDRESS 1264 MORGAN CHASE DRIVE
CITY-ST-ZIP MARIETTA GA

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME RADER, GARY A
STREET ADDRESS 16403 MYERS COURT
CITY-ST-ZIP CLERMONT FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME RADER, PAMELA J
STREET ADDRESS 16403 MYERS COURT
CITY-ST-ZIP CLERMONT FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME KAUL, JOHN R
STREET ADDRESS 2990 LOWER BETHANY ROAD
CITY-ST-ZIP BALL GROUND GA

TITLE ☒ Change ☐ Addition

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

AS
Kaul, John R
442 Broadlove Road
Ball Ground, GA 30107

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:

Philip C Evans

1-07-00

770-479-5622

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)