

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000462

1. Entity Name

HELD DISTRIBUTORS, INC.

FILED
May 02, 2000 8:00 am
Secretary of State

05-02-2000 90071 042 ***150.00

Principal Place of Business

Mailing Address

8071E 600 S.
 ELIZABETHTOWN IN 47232

8071E 600 S.
 ELIZABETHTOWN IN 47232-9546

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Stark Florida

Keystone Heights FL

Zip

Country

Zip

Country

32091

USA

32056

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUTTON, KIMBERLY D
 165 S.W. FAIRWAY DRIVE
 KEYSTONE HEIGHTS FL 32656

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 PD ☐ Delete
 NAME INGRAM, DON
 STREET ADDRESS 8071E 600 S
 CITY-ST-ZIP ELIZABETHTOWN IN

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

TITLE TD ☐ Delete
 NAME HUTTON, KIMBERLY D
 STREET ADDRESS 165 S.W. FAIRWAY DRIVE
 CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

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

TITLE VPD ☐ Delete
 NAME HUTTON, ERIC T
 STREET ADDRESS 165 S.W. FAIRWAY DRIVE
 CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

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

TITLE TD ☒ Delete
 NAME INGRAM, EULA
 STREET ADDRESS 8071E 600 S
 CITY-ST-ZIP ELIZABETHTOWN IN

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

TITLE SD ☐ Delete
 NAME INGRAM, EULA
 STREET ADDRESS 8071 E. 600 STREET
 CITY-ST-ZIP ELIZABETHTOWN IN 47232

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Kimberly D Hutton

42400

352473-5458

CR2E034 (9/99)