

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000005941

1. Entity Name
COOK'S CONFECTIONS, INC.

FILED
Sep 11, 2000 8:00 am
Secretary of State

09-11-2000 90061 005 ***550.00

Principal Place of Business

302 SOUTHGATE PLZ
SARASOTA FL 34239

Mailing Address

302 SOUTHGATE PLZ
SARASOTA FL 34239

2. Principal Place of Business

SAME
302 SOUTHGATE PLAZA

3. Mailing Address

SAME
302 SOUTHGATE PLAZA

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

58-2326125

Applied For

Not Applicable

Zip

34239

Country

SARASOTA

Zip

34239

Country

SARASOTA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COOK, DIANE
302 SOUTHGATE PLZ
SARASOTA FL 34239

7. Name and Address of New Registered Agent

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 *L. Diane Cook S/T*

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

(NOTE: Registered Agent signature required when reinstating)

9/5/00

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE P ☐ Delete
NAME COOK, GLENWOOD H
STREET ADDRESS 1401 ROSEWOOD CIR #21
CITY-ST-ZIP DALTON GA 30720

TITLE ST ☐ Delete
NAME COOK, DIANE
STREET ADDRESS 1401 ROSEWOOD CIR #21
CITY-ST-ZIP DALTON GA 30720

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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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: *L. Diane Cook*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/5/00

Date

Daytime Phone #

CR2E034 (5/00)