

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004861

1. Entity Name

PICARD REALTY RENTALS, INC.

Principal Place of Business

25350 PERDIDO BEACH BLVD
ORANGE BEACH AL 36561

Mailing Address

PO BOX 2576
ORANGE BEACH AL 36561-2576

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 72-1387392

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

PICARD, ANN
17287 PERDID KEY DRIVE
PENSACOLA FL 32507

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 PICARD, ANN
STREET ADDRESS 31625 SHOALWATER DRIVE
CITY-ST-ZIP ORANGE BEACH AL 36561

TITLE VVC ☐ Delete
NAME BARBER, THOMAS G
STREET ADDRESS 25561 CO. ROAD 65
CITY-ST-ZIP LOXLEY AL 36551

TITLE SD ☐ Delete
NAME MCCABE, JOHN N JR
STREET ADDRESS 4141 INDIAN BAYOU N.
CITY-ST-ZIP DESTIN FL 32541

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

TITLE VVC ☒ Change ☐ Addition
NAME BARBER, THOMAS G.
STREET ADDRESS 210 THAYER AVENUE (ADDRESS)
CITY-ST-ZIP PENSACOLA, FL. 32507

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

TITLE SD ☐ Change ☒ Addition
NAME MILLIE E. KING
STREET ADDRESS 31625 SHOALWATER DRIVE
CITY-ST-ZIP ORANGE BEACH, AL. 36561

TITLE ☐ Change ☐ Addition
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:

Thomas G. Barber / THOMAS G. BARBER 3/20/00 (334) 981-2643

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2000034 10/00