

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90102 033 ***150.00

DOCUMENT # G00395

1. Entity Name

SUNCO BROKERS, INC.

Principal Place of Business

1958 MONROE DRIVE N E
 ATLANTA GA 30324-887
 US

Mailing Address

P O BOX X1738
 ATLANTA GA 30301
 US

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

59-2217588

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BERRYMAN, HUNT M
1025 N. CHESTNUT RD
LAKELAND, FL
LAKELAND FL 33805

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

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

TITLE	PD	<input type="checkbox"/> Delete
NAME	BERRYMAN, HUNT M	
STREET ADDRESS	1208 STRATTON DR	
CITY-ST-ZIP	LAKELAND, FL 00000	
TITLE	CD	<input type="checkbox"/> Delete
NAME	WATKINS, IV W B	
STREET ADDRESS	1144 WEST GRIFFIN RD	
CITY-ST-ZIP	LAKELAND FL 33804	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	FREEMAN, WILLIAM A	
STREET ADDRESS	1958 MONROE DRIVE N E	
CITY-ST-ZIP	ATLANTA GA 30324	
TITLE	ST	<input type="checkbox"/> Delete
NAME	READY, JR GEORGE W	
STREET ADDRESS	1958 MONROE DRIVE N E	
CITY-ST-ZIP	ATLANTA GA 30324-4887	
TITLE	D	<input type="checkbox"/> Delete
NAME	WATKINS, JOHN F	
STREET ADDRESS	1144 WEST GRIFFIN RD	
CITY-ST-ZIP	LAKELAND FL 33804	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

SEC./TREAS.

4-13-00

404-872-3841

Date

Daytime Phone #

CR2E034 (9/99)