

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # G04265

1. Entity Name

TCF MANUFACTURING, INC.

Principal Place of Business

Mailing Address

% 1020 S 86TH ST  
TAMPA FL 33619

PO BOX 89037  
TAMPA FL 33689-0400

2. Principal Place of Business

3804 SYDNEY ROAD

3. Mailing Address

Suite, Apt. #, etc.

City & State

PLANT CITY FL

City & State

Zip  
33567

Country  
USA

Zip

Country

4. FEI Number 59-2230957

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

ROBERTS, RONALD E  
2302 MEDFORD LANE  
BRANDON FL 33511

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 \$350.00**  
**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  
NAME ROBERTS, RONALD J  
STREET ADDRESS 935 SYMPHONY ISLES BLVD  
CITY-ST-ZIP APOLLO BEACH FL 33512 ☐ Delete

TITLE President, Director  
NAME RONALD E. ROBERTS JR.  
STREET ADDRESS 10214 OASIS PALM DRIVE  
CITY-ST-ZIP Tampa, FL 33615 ☒ Change ☐ Addition

TITLE DC  
NAME ROBERTS, RONALD E SR  
STREET ADDRESS 2302 MEDFORD LANE  
CITY-ST-ZIP BRANDON FL 33511 ☐ Delete

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

TITLE D  
NAME ROBERTS, JUANITA  
STREET ADDRESS 2302 MEDFORD LANE  
CITY-ST-ZIP BRANDON FL 33511 ☐ Delete

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

TITLE ST  
NAME WAND, ROBERT J  
STREET ADDRESS 1307 CORNER OAKS DR  
CITY-ST-ZIP BRANDON FL 33510 ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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 #

FILED

Jan 27, 2000 8:00 am  
Secretary of State

01-27-2000 90034 008 \*\*\*150.00



DO NOT WRITE IN THIS SPACE