

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 30, 2001 8:00 am**  
**Secretary of State**

0529357

**DOCUMENT # G84997**

1. Entity Name

**MAX-PAK, INC.**

Principal Place of Business

**2808 NEW TAMPA HWY  
 LAKELAND FL 33815  
 US**

Mailing Address

**2808 NEW TAMPA HWY  
 LAKELAND FL 33815  
 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

**59-2368507**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**MCBRIDE, SCOTT J  
 1738 CLARENDON PLACE  
 LAKELAND FL 33803**

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.

(NOT 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, 2001 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	BESWICK, ROBERT K	
STREET ADDRESS	412 E. BELVEDERE ST	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MCBRIDE, SCOTT J	
STREET ADDRESS	1738 CLARENDON AVE.	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE	S	<input type="checkbox"/> Delete
NAME	MCBRIDE, JULIE L	
STREET ADDRESS	1738 CLARENDON AVE.	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE	T	<input type="checkbox"/> Delete
NAME	BESWICK, RHONDA G	
STREET ADDRESS	412 E. BELVEDERE ST.	
CITY-ST-ZIP	LAKELAND FL 33803	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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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		

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

**SCOTT J. MCBRIDE**

Date

Daytime Phone #

**4/27/01 863-682-0123**

CR2E034 (10/00)



Attachment  
DH 84997  
A0071617

May 21, 2001

Division of Corporations  
Uniform Business Report Filings  
P O Box 1500  
Tallahassee, FL 32302-1500

Attention: Remittance Department

Reference: Payment of Document #G84997

To Whom It May Concern,

Enclosed please find payment for our 2001 Uniform Business Report (UBR). I realize it is late and kindly ask for further consideration in this matter. In February 2001, our controller, Mr. Kellams resigned from Maxpak Corporation. This position remains open to date and we are tackling these duties as well as possible. Before leaving Mr. Kellams carefully brought to my attention all matters that were left unfinished or in progress. I felt all ends were tied up until today. I was looking for an item in Mr. Kellams old desk and came across this UBR form. I rushed to process and over-night this payment as once.

I am sure this time of year you are met with many reasons for delayed payments. I do cordially request your consideration in this matter to waive the late fee for Maxpak Corporation your attention and regard will be truly appreciated.

Sincerely,

A handwritten signature in cursive script, appearing to read "Ann Sims".

Ann Sims  
Office Administrator  
Maxpak Corporation

