

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90234 039 ***150.00

DOCUMENT # G88540

1. Entity Name

WILLIAM J. SCHULKE, INC.

Principal Place of Business

% GEORGE G. COLLINS, JR.
 756 BEACHLAND BLVD
 VERO BEACH FL 32963-1745

Mailing Address

% GEORGE G. COLLINS, JR.
 756 BEACHLAND BLVD
 VERO BEACH FL 32963-1745

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 **59-2378811**

Applicable 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

**COLLINS, GEORGE G.
 756 BEACHLAND BLVD
 VERO BEACH FL**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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 re-registering)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	CHANGE	ADDITION
DP	SCHULKE, WILLIAM J.	1249 LARKSPUR STREET	SEBASTIAN FL	☐					☐	☐
DST	SCHULKE, GLORIA JEAN	1249 LARKSPUR STREET	SEBASTIAN FL	☐					☐	☐
DVP	SCHULKE, JOSEPH WILLIAM	1249 LARKSPUR STREET	SEBASTIAN FL	☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

WILLIAM J. SCHULKE

4/18/01

(561) 231-4343

(Daytime Phone #)

CR2E034 (10/00)