

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2000 8:00 am
Secretary of State

02-11-2000 90026 041 ***150.00

DOCUMENT # G94946

1. Entity Name

AMBER GLADES, INC.

Principal Place of Business

Mailing Address

3113 STATE ROAD 580, LOT 59
 SAFETY HARBOR FL 34695

3113 STATE ROAD 580, LOT 59
 SAFETY HARBOR FL 34695-5905

B0018010



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2497828

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DAMONTE, JONATHAN J.
7800 113TH ST.
FORTUNE FEDERAL BLDG., SUITE 206
SEMINOLE FL 33542

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

Jonathan J. Damon

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 Delete
 NAME **PD PARKS, EDGAR**
 STREET ADDRESS **3113 STATE RD 580 #367**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VD LAWRENCE, HARRY**
 STREET ADDRESS **3113 S R 580 #169**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TD THOMAS, ANNA**
 STREET ADDRESS **3113 S R 580 #59**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **SD WALTERS, ESTERLE**
 STREET ADDRESS **3113 S R 580 #243**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BARROWMAN, ROY**
 STREET ADDRESS **3113 S R 580 #410**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 NAME **D**
 STREET ADDRESS **Karns, David**
 CITY-ST-ZIP **3113 S.R.580 #337, Safety Harbor,**

TITLE Delete
 NAME **D BIDDLE, GALEN**
 STREET ADDRESS **3113 S R 580 #414**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Add
 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)(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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anna Thomas **ANNA THOMAS** 2/4/00

Date

727-725-1925

Daytime Phone #

994946

00018010

D
Adamowicz, Anthony
3113 S.R.580 # 263
Safety Harbor, Fl. 34695