

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90501 050 \*\*\*150.00

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**DOCUMENT # G94946**

1. Entity Name

**AMBER GLADES, INC.**

Principal Place of Business

3113 STATE ROAD 580, LOT 59  
 SAFETY HARBOR FL 34695

Mailing Address

3113 STATE ROAD 580, LOT 59  
 SAFETY HARBOR FL 34695

00001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

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

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

7. Name and Address of New Registered Agent

Name **Justin G. Joseph**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1266 S. Pinellas Avenue**  
 City **Tarpon Springs** **FL** Zip Code **34689**

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.

**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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	PARKS, EDGAR	3113 STATE RD 580 #367	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>
VD	LAWRENCE, HARRY	3113 S R 580 #169	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>
TD	THOMAS, ANNA	3113 S R 580 #59	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>
SD	WALTERS, ESTERLLE	3113 S R 580 #243	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>
D	BARROWMAN, ROY	3113 S R 580 #410	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>
D	BIDDLE, GALEN	3113 S R 580 #414	SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	Wm Chesk	3113 State Road 580 #398	Safety Harbor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	Irving Turner	3113 S.R. 580 #439	Safety Harbor, FL 34695	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TD	Benn Ehrlich	3113 S.R. 580 #381	Safety Harbor, FL 34695	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SD	Rosemary Clever	3113 S.R. 580 #68	Safety Harbor, FL 34695	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Norma Frogde	3113 S.R. 580 #11	Safety Harbor, FL 34695	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Fred Ridley	3113 S.R. 580 #387	Safety Harbor, FL 34695	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

*Ronald C. Ehrlich, Treasurer*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/01

Date

Daytime Phone #

CR20034 (10/00)

# 694946  
729351

D  
Mary Ann Schuler  
3113 State Road 580 #103  
Safety Harbor, Fl. 34695

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