

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 03, 2001 08:00 AM**
Secretary of State**DOCUMENT # H01792**1. Entity Name
MUIRFIELD, INC.**Principal Place of Business**

28739 HWY (SR) 54 W

WESLEY CHAPEL

FL

Mailing Address

28739 STATE ROAD 54 W

WESLEY CHAPEL

FL

335434231

2. Principal Place of Business

28739 STATE ROAD 54 W

3. Mailing Address

28739 STATE ROAD 54 W

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

WESLEY CHAPEL

FL

City & State

WESLEY CHAPEL

FL

4. FEI Number**59-2419050**

Applied For

Not Applicable

Zip

335434231

Country

US

Zip

335434231

Country

US

5. Certificate of Status Desired☒**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**

PARKS, RONALD R.

28739 STATE ROAD 54 W

WESLEY CHAPEL

FL

335434231

7. Name and Address of New Registered Agent**Name**

PARKS RONALD R

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

28739 STATE ROAD 54 W

City

WESLEY CHAPEL

FL

Zip Code

335434231

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 **RONALD R PARKS****01/03/2001**

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, 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	DST	☐ Delete
NAME	PARKS, LUCILLE J.	
STREET ADDRESS	13824 CYPRESS VILLAGE	
CITY-ST-ZIP	TAMPA FL	
TITLE	V	☐ Delete
NAME	COUEY, STEVEN W.	
STREET ADDRESS	18112 LONGWATER RUN DR.	
CITY-ST-ZIP	TAMPA FL	
TITLE	DCV	☐ Delete
NAME	PARKS, JACK W.	
STREET ADDRESS	12720 CASEY RD	
CITY-ST-ZIP	TAMPA FL 33624	
TITLE	PD	☐ Delete
NAME	PARKS, RONALD R.	
STREET ADDRESS	3405 MORRISON AVE	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DST	☒ Change ☐ Addition
NAME	PARKS LUCILLE J	
STREET ADDRESS	12718 CASEY RD	
CITY-ST-ZIP	TAMPA FL 336244502	
TITLE	V	☒ Change ☐ Addition
NAME	COUEY STEVEN W	
STREET ADDRESS	18112 LONGWATER RUN DR.	
CITY-ST-ZIP	TAMPA FL 33647	
TITLE	DCV	☒ Change ☐ Addition
NAME	PARKS JACK W	
STREET ADDRESS	12720 CASEY RD	
CITY-ST-ZIP	TAMPA FL 336244502	
TITLE	PD	☒ Change ☐ Addition
NAME	PARKS RONALD R	
STREET ADDRESS	3405 MORRISON AVE	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ 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: RONALD R PARKS

PD

01/03/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)