## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Feb 04, 2000 8:00 am Secretary of State DOCUMENT # **H38553** 1. Entity Name LABAR ENTERPRISES, INC. 02-04-2000 90074 006 \*\*\*150.00 Principal Place of Business Mailing Address 2331 WHITFIELD PARK AVE SARASOTA FL 34243 US 2331 WHITFIELD PARK AVE SARASOTA FL 34243-4032 C0017095 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-2503683 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MEISSNER, GREGORY Street Address (P.O. Box Number is Not Acceptable) 537 10 ST WEST **BRADENTON FL 33505** 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 (NOTE. Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Change ☐ Addition TITLE Delete TITLE RITZENHALER, LARRY J II NAME STREET ADDRESS 511 64TH AVE DR W STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BRADENTON FL 34207 TITLE ☐ Delete TITLE Change ☐ Addition RITZENHALER, BARBARA G NAME NAME 2331 WHITFIELD PARK AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34243 ☐ Change ☐ Addition ☐ Delete TITLE TITLE RITZEHHALER, LARRY J NAME NAME

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 chapted, or on an attachment with an address, with an address. changed, or on an attachment with an address, with

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SIGNATURE:

2331 WHITFIELD PARK AVE

SARASOTA FL 34243

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