

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H79327

1. Entity Name

PATRICIA TRAPNELL, INC.

FILED

May 05, 2001 8:00 am
Secretary of State

05-05-2001 90835 012 ***150.00

Principal Place of Business

Mailing Address

18462 SE OLD TRAIL DR W
JUPITER FL 33478
US

PO BOX 9229
JUPITER FL 33468-9229
US

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 59-2581039

Applied 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

TRAPNELL, PATRICIA
18462 SE OLD TRAIL DR W
JUPITER FL 33458

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP
NAME TRAPNELL, PATRICIA
STREET ADDRESS 18462 SE OLD TRAIL DR W
CITY-ST-ZIP JUPITER FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP
NAME CRAWFORD, CLETUS A
STREET ADDRESS 18462 SE OLD TRL DR W
CITY-ST-ZIP JUPITER FL ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME GEORGE, LUISE
STREET ADDRESS 11511 63RD LANE NORTH
CITY-ST-ZIP ROYAL PALM BEACH FL ☒ Delete

TITLE Treasurer
NAME Carolyn D. Hunt
STREET ADDRESS 2017 SW Hunters Club Way
CITY-ST-ZIP Palm City, FL 34990 ☐ Change ☒ Addition

TITLE S
NAME KOLDRICK, MARY L
STREET ADDRESS 725 NORTH A1A - #E206
CITY-ST-ZIP JUPITER FL 33477 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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: *Patricia Trapnell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia Trapnell 4/25/01 561 744-3279
Date Daytime Phone #

CR2E034 (10/00)