

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90092 017 ***150.00

DOCUMENT # H88402

1. Entity Name

SMITH'S TRACTOR SERVICE, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

% CAROL A. SMITH
 2730-70TH ST. SW
 NAPLES FL 33999

% CAROL A. SMITH
 2730-70TH ST. SW
 NAPLES FL 34105-7220
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2608837

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

Name

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

City

FL

Zip Code

**SMITH, CAROL A.
 2730-70TH ST, SW
 NAPLES FL 34105**

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, 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	DP SMITH, CAROL A. 2730-70TH ST SW NAPLES FL	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			NAME		
ST-ZIP			STREET ADDRESS		
			CITY-ST-ZIP		
TITLE	D SMITH, GEORGE W. 2730 70TH STREET SW NAPLES FL	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			NAME		
ST-ZIP			STREET ADDRESS		
			CITY-ST-ZIP		
TITLE	D SMITH, DARRIN T. 1263 12TH STREET NORTH NAPLES FL 34102	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS			NAME		
ST-ZIP			STREET ADDRESS		
			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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ST-ZIP			STREET ADDRESS		
			CITY-ST-ZIP		
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STREET ADDRESS			NAME		
ST-ZIP			STREET ADDRESS		
			CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Carol A. Smith
 Carol A. Smith

Jan 18, 2000

941-261-3032

CR2E034 (9/99)