

2001 UNIFORM BUSINESS REPORT (UBR)

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

03-12-2001 90463 015 ***150.00

DOCUMENT # H89161

1. Entity Name
HOLDINGS INVESTMENTS, INC.

Principal Place of Business

1803 U.S. 19
HOLIDAY FL 34691
US

Mailing Address

%J.BOB HUMPHRIES, ESQ., FOWLER, WHITE
P.O. BOX 1438
TAMPA FL 33601

2. Principal Place of Business

2535 SUCCESS DRIVE

3. Mailing Address

2535 SUCCESS DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ODESSA FL

City & State

ODESSA FL

4. FEI Number

59-2626249

Applied For

Not Applicable

Zip

Country

33556

Zip

Country

33556

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

**BAKER, RICHARD W.
2535 SUCCESS DRIVE
ODESSA FL 33556**

Name

Richard W. Baker

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

2535 Success Drive

City

Odessa

FL

Zip Code
33556

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

R. Baker

Signature, typed or printed name of registered agent and fee 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 **PD** ☐ Delete
NAME **SPEER, ROY M**
STREET ADDRESS **2535 SUCCESS DR.**
CITY-ST-ZIP **ODESSA FL 33556**

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

TITLE **STD** ☐ Delete
NAME **BAKER, RICHARD**
STREET ADDRESS **2535 SUCCESS DRIVE**
CITY-ST-ZIP **ODESSA FL 33556**

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

TITLE **AS** ☒ Delete
NAME **HUMPHRIES, J B**
STREET ADDRESS **501 E KENNEDY BLVD STE 1700**
CITY-ST-ZIP **TAMPA FL 33602**

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

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:

R. Baker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Richard W. Baker, Director/Secretary

Date

Daytime Phone #

CR2E034 (10/00)