

2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2004 8:00 am
Secretary of State

DOCUMENT # H91917

1. Entity Name TU-CO PEAT, INC.

01-20-2004 90045 025 ***150.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4665 US 27 S

Suite, Apt. #, etc.

3. Mailing Address

4665 US 27 S

Suite, Apt. #, etc.

City & State

Sebring, Florida

City & State

Sebring, Florida

4. FEI Number

59-2702965

Applied For

Not Applicable

Zip 33870-5527

Country

USA

Zip 33870-5527

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

RAYMOND A TUBBS

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

4665 US 27 SO

City

SEBRING

FL

Zip Code

33870-5527

**DO NOT WRITE
IN THIS SPACE**

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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	ST TUBBS, SHEILA T 4700 BEAR RD SEBRING FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V TUBBS, Michael L 4665 US 27 SO SEBRING, FLORIDA 33870-5527	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TUBBS, RAYMOND A. 4665 US 27 SO SEBRING, FL 33870-5527	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael L. Tubbs
MICHAEL L. TUBBS, as VP

1-14-04

Date

4665 US 27 SO

Daytime Phone #

CR2E034B (12/01)