

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90139 004 ***150.00

DOCUMENT # H92547

1. Entity Name

THE HRKAL COMPANY

Principal Place of Business

26920 WEDGEWOOD DR., SW 306
BONITA SPRINGS FL 33923

Mailing Address

26920 WEDGEWOOD DR., SW 306
BONITA SPRINGS FL 34134-8642

2. Principal Place of Business

26920 Wedgewood Dr.

3. Mailing Address

Same

Suite, Apt. #, etc.

306

Suite, Apt. #, etc.

City & State

Bonita Springs, FL

City & State

4. FEI Number **59-2670453**

☐ Applied For

☐ Not Applied

Zip

34134

Country

USA

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

SPEAR, JOHN D.
9200 BONITA BEACH RD.
SUNSHIRE PROFESSIONAL CENTER
BONITA SPRINGS FL 33923

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, 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

TITLE PD
NAME HRKAL, JOHN W.
STREET ADDRESS 26920 WEDGEWOOD DR SW
CITY-ST-ZIP BONITA SPRINGS FL ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Pres./Sec.
NAME Craig Alan Hrkal
STREET ADDRESS 1909 Shorewood Lane
CITY-ST-ZIP Mound, MN. 55364 ☐ Change ☒ Add

TITLE V.P./Trans
NAME JOHN W. HRKAL
STREET ADDRESS 26920 Wedgewood Dr. 306
CITY-ST-ZIP Bonita Springs, FL 34134 ☒ Change ☐ Addition

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

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

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

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

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:

John W. Hrkal
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-00
Date

941-947-3870
Daytime Phone #