

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J37103

1. Entity Name

GOEBEL'S PROPERTY & DEVELOPMENTS, INC.

FILED

May 12, 2001 8:00 am
Secretary of State

05-12-2001 90038 025 ***150.00

Principal Place of Business

Mailing Address

~~PO BOX 770668~~
~~OCALA FL 34477-0668~~
~~US~~

PO BOX 770668
OCALA FL 34477-0668
US

OK

2. Principal Place of Business

Mailing Address

5072 NW 80th Ave Rd

Suite, Apt. #, etc.

City & State

City & State

Ocala, FL

Zip 34482

Country US

Zip

Country

4. FEI Number 59-3302692

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

GOEBEL, ~~ROBERT J.~~
~~1001 SW 37th Ave~~
~~OCALA FL 34474~~

Robert J. Change
P.O. Box 770 668-
34477-0668

Name

GOEBEL, ROBERT J.

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

5072 N.W. 80th Ave Rd

City

Ocala

FL

Zip Code 34482

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

4.30.01

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 VPTD
NAME LEE, DOROTHY G
STREET ADDRESS 5072 NW 80TH AVE RD
CITY-ST-ZIP Ocala FL 34482

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PSD
NAME GOEBEL, ROBERT J
STREET ADDRESS ~~1001 SW 37th Ave~~ P.O. Box 770 668-
CITY-ST-ZIP ~~OCALA FL 34474~~ 34477-0668

☐ Delete

TITLE
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CITY-ST-ZIP

☒ Change ☐ Addition

5072 N.W. 80th Ave Rd
Ocala, FL 34482

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☐ 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

4.30.01 337-5400

CR2E034 (10/00)