

7/24/0

FILED
Aug 10, 2001 8:00 am
Secretary of State

07-24-2001 90022 041 ***550.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J39623

1. Entity Name

I & B ENTERPRISES, INC.

Principal Place of Business

959 W JEFFERSON ST
BROOKSVILLE FL 34601

Mailing Address

959 W JEFFERSON ST
BROOKSVILLE FL 34601

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2746187

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RANKIN, DAVID P.
4600 W. CYPRESS
SUITE 410
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name

Judy Ingle

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

14064 Chippendale St

City

Spring Hill

FL

Zip Code

34609

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	☒ Delete
NAME	RANKIN, DAVID P.	
STREET ADDRESS	4600 W. CYPRESS #410	
CITY-ST-ZIP	TAMPA FL	
TITLE	P	☐ Delete
NAME	INGLE, THOMAS	
STREET ADDRESS	14064 CHIPPENDALE ST.	
CITY-ST-ZIP	SPRING HILL, FL	
TITLE	C	☐ Delete
NAME	BARNEY, RICHARD	
STREET ADDRESS	2601 MERIDA LANE.	
CITY-ST-ZIP	TAMPA FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Secretary	☐ Change ☒ Addition
NAME	Judy Ingle	
STREET ADDRESS	14064 Chippendale St	
CITY-ST-ZIP	Spring Hill, FL 34609	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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:

SIGNATURE REQUIRED Judy Ingle

Date

7/19/01

Daytime Phone #

352-799-0071

CR2E094 (5/01)