

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J57492

1. Entity Name

SIRINGER & SONS, INC.

FILED
Feb 24, 2000 8:00 am
Secretary of State

02-24-2000 90017 008 ***150.00

Principal Place of Business

249 CENTER COURT
VENICE FL 34292
US

Mailing Address

249 CENTER COURT
VENICE FL 34292-3549
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2804624

Applied For

Not Applicable

Zip

Country

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

SIRINGER, BRAD E.
1189 VERMEER DR
~~P.O. BOX 3174~~
NOKOMIS FL 34293

P.O. Box was deleted 7 years ago

Name Siringer, Brad E.
Street Address (P.O. Box Number is Not Acceptable)
1189 Vermeer Drive

City Nokomis, FL Zip Code 34275

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☐ Delete
NAME SIRINGER, RANDY J.
STREET ADDRESS 2083 TIMUCUA TRAIL
CITY-ST-ZIP NOKOMIS FL 34275

TITLE VSD ☐ Delete
NAME SIRINGER, BRAD E.
STREET ADDRESS 1189 VERMEER DRIVE
CITY-ST-ZIP NOKOMIS FL 34275

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS Add zip code 34275
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Add middle initial "E."
STREET ADDRESS Add zip code 34275
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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Brad E. Siringer

2-7-00

Date

941-493-3934

Daytime Phone #

CR2E034 (9/99)