## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # J70300**

1. Entity Name

## GLANCY INVESTMENTS, INC.

Principal Place of Business % ARNOLD VAN DE VOORDE 12212 GLANCY LANE SPRING HILL FL 34609

Mailing Address

% ARNOLD VAN DE VOORDE 12212 GLANCY LANE SPRING HILL FL 34609-5761

## 2. Principal Place of Business 3. Mailing Address

**FILED** Feb 28, 2000 8:00 am **Secretary of State** 

02-28-2000 90073 021 \*\*\*150.00

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Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.  City & State		DO NOT WRITE IN THIS SPACE			
					4. FEI Number 59-2813881		Applied For Not Applicable
Zip	Country	Zip	Cour	ntry			8.75 Additional ee Required
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
VAN DE VOORDE, ARNOLD 12212 GLANCY LANE SPRING HILL FL 34609-2761				Name			
				Street Address (P.O. Box Number is Not Acceptable)			
				City	<del></del>	FL	Zip Code
The above nar	ned entity submits this stateme	nt for the purpose of chan-	ging its register	ed office or regis	tered agent, or both, in the State of Florida.		

3.	This corporation is eligible to satisfy its intangible			
	Tax filing requirement and elects to do so.			
	(See criteria on back)			

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

(NOTE, Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

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11.	OFFICERS AND DIF	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VAN DE VOORDE, ARNOLD 12212 GLANCY LANE SPRING HILL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT VAN DE VOORDE, IRMGARD 12212 GLANCY LANE SPRING HILL FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-7IP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition	

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.