

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # J92787**

1. Entity Name

SWANSON & TILLIS, INC.**FILED****Jan 21, 2000 8:00 am**
Secretary of State

01-21-2000 90100 032 ***150.00

Principal Place of Business

Mailing Address

401 FLAMINGO DR.
~~413 S FLORIDA AVE~~
LAKELAND FL 33803
US**401 FLAMINGO DR.**
~~413 S FLORIDA AVE~~
LAKELAND FL 33803-4823
US

2. Principal Place of Business

3. Mailing Address

401 Flamingo Dr
Suite, Apt. #, etc.**401 Flamingo Dr**
Suite, Apt. #, etc.

City & State

Lakeland FLZip **33803** Country

City & State

Lakeland FLZip **33803** Country

4. FEI Number

59-2845769

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

TILLIS, JEWEL J.**~~413 S FLORIDA AVE~~** **401 Flamingo Dr**
LAKELAND FL 33801 **Lakeland FL 33803**

Name

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

401 Flamingo Dr

City

Lakeland**FL**Zip Code
33803

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

Jewel J. Tillis

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

(NOTE: Registered Agent signature required when reinstating)

1/14/2000
DATE9. 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 State10. 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	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	D			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	SWANSON, ENID R.	342 TANAGER CT	LAKELAND FL						
	PD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	TILLIS, JEWEL J.	401 FLAMINGO DR	LAKELAND FL						
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> 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:

Jewel J. Tillis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**1/14/2000**
Date**863-688-5001**
Daytime Phone #

CR2E034 (9/99)