

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J97977

1. Entity Name

AMERICAN RECOVERY SERVICE CO. OF DAYTONA BEACH

FILED
Mar 04, 2000 8:00 am
Secretary of State

03-04-2000 90053 015 ***150.00

Principal Place of Business

Mailing Address

852 CARSWELL AVE.
HOLLY HILL FL 32117
US

852 CARSWELL AVE.
HOLLY HILL FL 32117-3514
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1007 PALM VIEW DR

1007 PALM VIEW DR

City & State

City & State

DAYTONA BEACH, FL

DAYTONA BEACH, FL

Zip

Country

Zip

Country

32119

FLORIDA

32119

FLORIDA

6. Name and Address of Current Registered Agent

4. FEI Number

59-2855130

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

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

JOHN H. YATES

852 CARSWELL AVE

HOLLY HILL FL 32117

1007 PALM VIEW DRIVE

DAYTONA BEACH

FL

Zip Code

32119

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 NAME STREET ADDRESS CITY-ST-ZIP	DP YATES, JOHN H 852 CARSWELL AVE HOLLY HILL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1007 PALM VIEW DRIVE DAYTONA BEACH, FL 32119	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST YATES, PAT 852 CARSWELL AVE HOLLY HILL FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1007 PALM VIEW DRIVE DAYTONA BEACH, FL 32119	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 all other like empowered.

SIGNATURE:

JOHN H. YATES

2.23.00 904.258.0694

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)