

2001 UNIFORM BUSINESS REPORT (UBR)

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

05-10-2001 90218 030 ***150.00

DOCUMENT # K15310

1. Entity Name

BASSETT BROTHERS OF PINELLAS, INC.

Principal Place of Business

6285 71STREET N.
 PINELLAS PARK FL 33781-4833

Mailing Address

6285 71STREET N.
 PINELLAS PARK FL 33781-4833
 US

2. Principal Place of Business

3. Mailing Address

7346 PARK Side Villa Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST. PETE. FL.

4. FEI Number **59-2876931**

Applied For

Not Applicable

Zip

Country

Zip

Country

33709 US.

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

MATTSON, RICK A.
7113 FIRST AVE S.
ST PETERSBURG FL 33733

Name

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

City

FL

Zip Code

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, 2001 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 **D** ☐ Delete
 NAME **BASSETT, HOWARD W.**
 STREET ADDRESS **6285 71ST ST N.**
 CITY-ST-ZIP **PINELLAS PARK FL**

TITLE ☒ Change ☐ Addition
 NAME **7346 PARK Side Villa Dr.**
 STREET ADDRESS **ST. PETE. FL. 33709**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Delete
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 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: **Howard W. Bassett**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26, 2001

Date

727) 541-4136

Daytime Phone #

CR2E034 (10/00)