

FOR PROFIT CORPORATION ^{AMENDED} UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUL -2 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K18150

1. Entity Name

F & S Industries, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1417 S.W. 17th St.

3. Mailing Address

P.O. Box 3688

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ocala, Florida

City & State

Ocala, Florida

4. FEI Number

59-3012615

Applied For

Not Applicable

Zip

34474

Country

USA

Zip

34478

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Strickland, Stuart B.

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

1417 S.W. 17th St.

City

Ocala

FL

34474

**DO NOT WRITE
IN THIS SPACE**

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

Stuart B. Strickland

Stuart B. Strickland D/P

6-24-02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DP

Strickland, Stuart B.

1417 S.W. 17th St.

Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

200006251922-6
-07/08/02--01065--027
*****70.00 *****70.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DST

McCraw, Charles Thomas, Jr.

1417 S.W. 17th St.

Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

200006251922-6
-07/08/02--01065--027
*****70.00 *****61.25

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

Kirkpatrick, Kenneth B.

1417 S.W. 17th St.

Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D

Branson, Russell S.

1417 S.W. 17th St.

Ocala, FL 34474

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Stuart B. Strickland

Stuart B. Strickland D/P

6-24-02

352-732-3247

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)