

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K20430

1. Entity Name

JOHN MYERS TOOLS, INC.

FILED

Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90007 005 ***150.00

Principal Place of Business

3387 RCA BLVD.
PALM BCH. GRDNS. FL 33410

Mailing Address

3387 RCA BLVD.
PALM BCH. GRDNS. FL 33410

2. Principal Place of Business

2201 S.W. Riverside Dr.

3. Mailing Address

2201 S.W. Riverside Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm City, FL

City & State

Palm City, FL

4. FEI Number

65-0104150

Applied For

Not Applicable

Zip

34990

Country

Martin

Zip

34990

Country

Martin

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MYERS, HELEN
3387 RCA BLVD.
PALM BCH. GRDNS. FL 33410

7. Name and Address of New Registered Agent

Name

Myers, Helen

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

2201 S.W. Riverside Dr.

City

Palm City

FL

Zip Code

34990

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

TITLE	P	<input type="checkbox"/> Delete
NAME	MYERS, JOHN T. JR	
STREET ADDRESS	3387 RCA BLVD	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MYERS, HELEN	
STREET ADDRESS	3387 RCA BLVD	
CITY-ST-ZIP	PALM BCH GARDENS FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	2201 S.W. Riverside	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	Palm City, FL 34990	
TITLE	" "	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Helen Myers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/01 (561) 220-3182
Date Daytime Phone #

CR2E034 (10/00)