

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2000 8:00 am
Secretary of State

02-09-2000 90244 001 *****8.75

DOCUMENT # K70182

1. Entity Name

CONSOLIDATED BUSINESS VENTURES, INC.

Principal Place of Business

Mailing Address

CANTERBURY CT.

60 CANTERBURY CT.

PARK FL 32065

#864
ORANGE PARK FL 32065-7290
US

2. Principal Place of Business

3. Mailing Address

411 Walnut St.

411 Walnut St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#864

PMB # 864

City & State

City & State

Green Cove Springs, FL

Green Cove Springs, FL

Zip

Zip

32043

32043

Country

Country

USA

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2939889

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

BASS, ROBERT W
60 CANTERBURY CT.
#864
ORANGE PARK FL 32065

Name

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

411 Walnut St.

#864

City

Green Cove Springs FL

Zip Code

32043

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 Robert W. Bass

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

(NOTE: Registered Agent signature required when reinstating)

2/2/2000

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	PD BASS, ROBERT W. 60 CANTERBURY CT. #864 ORANGE PARK FL 32065	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BASS, ROBERT W. 411 WALNUT ST., PMB #864 GREEN COVE SPRINGS, FL 32043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BASS, CARON S. 60 CANTERBURY CT. #864 ORANGE PARK FL 32065	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BASS, CARON S. 411 WALNUT ST., PMB #864 GREEN COVE SPRINGS, FL 32043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SCHRIEFER, FRED E. 60 CANTERBURY CT. #864 ORANGE PARK FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. SCHRIEFER, FRED E. 411 WALNUT ST., PMB #864 GREEN COVE SPRINGS, FL 32043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCMAHON, STEPHEN G 60 CANTERBURY CT. #864 ORANGE PARK FL 32065	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MCMAHON, STEPHEN G. 411 WALNUT ST., PMB #864 GREEN COVE SPRINGS, FL 32043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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: ROBERT W. BASS, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/2000

DATE

904262-3019

Daytime Phone #

CR2E034 (9/99)