

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K79298

1. Entity Name

ATLANTIC COAST FINANCIAL SERVICES, INC.

Principal Place of Business

1677 WELLS ROAD
SUITE C
ORANGE PARK FL 32073
US

Mailing Address

1677 WELLS ROAD
SUITE C
ORANGE PARK FL 32073
US

2. Principal Place of Business

1855 WELLS ROAD

3. Mailing Address

S/A 1855 WELLS RD

Suite, Apt. #, etc.

5

Suite, Apt. #, etc.

5

City & State

Orange Park, FL

City & State

Orange Park, FL

Zip

32073

Country

US

Zip

32073

Country

US

4. FEI Number

59-2947197

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIVENS, RICHARD W.
1568 ROYAL FERN LANE
ORANGE PARK FL 32073

7. Name and Address of New Registered Agent

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 \$500.00 / \$0.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PD
NAME GIVENS, RICHARD W.
STREET ADDRESS 1568 ROYAL FERN LANE
CITY-ST-ZIP ORANGE PARK FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jul 13, 2000 8:00 am
Secretary of State

07-13-2000 90013 050 ***150.00

DO NOT WRITE IN THIS SPACE

ATLANTIC COAST FINANCIAL SERVICES, INC.

Attachment
D#K79298
DW68955

1855 WELLS ROAD
ORANGE PARK, FLORIDA 32073

Phone 904-269-9200
Fax 904-269-9988

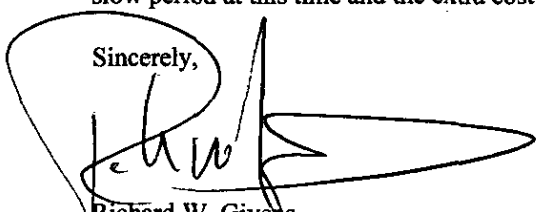
July 06, 2000

Department of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

To whom it may concern

A mistake was made. We have moved and didn't receive a prior notice. This fee all prior years has been \$150.00. I called and tried to speak to someone but was unable to get anyone to respond to my calls. I feel that our postal service failed to deliver our first notice, and was very lucky that the person at our prior address felt this notice maybe very important. I'm sending the amount we have paid in previous years hoping this will be ok. We are in a slow period at this time and the extra cost for filing would really hurt us. Thank you for all your help in this matter.

Sincerely,



Richard W. Givens
President