

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90048 024 ***150.00

0045229 AV

DOCUMENT # K80481

1. Entity Name

RESENER INVESTMENTS, INCORPORATED

Principal Place of Business

2586 N. MONROE STREET
TALLAHASSEE FL 32303
US

Mailing Address

2586 N. MONROE STREET
TALLAHASSEE FL 32303
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1407 Alshire Ct. S.
Suite, Apt. #, etc.
Tallahassee

3. Mailing Address

1407 Alshire Ct. S.
Suite, Apt. #, etc.

City & State

FL

City & State

Tallahassee, FL

Zip

32317

Country

Leon

Zip

32317

Country

Leon

4. FEI Number

59-2942323

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RESENER, GAYLYNN
2586 N. MONROE STREET
TALLAHASSEE FL 32303

7. Name and Address of New Registered Agent

Name

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

1407 Alshire Ct. S.

City

Tallahassee

FL

Zip Code

32317

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, 2002 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 ☐ Delete
NAME D
STREET ADDRESS RESENER, GUY C.
CITY-ST-ZIP 2856 N MONROE ST
TALLAHASSEE FL

TITLE ☐ Delete
NAME D
STREET ADDRESS RESENER, GAYLYNN
CITY-ST-ZIP 2856 N MONROE ST
TALLAHASSEE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1407 Alshire Ct. S.
CITY-ST-ZIP Tallahassee, FL. 32317

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1407 Alshire Ct. S.
CITY-ST-ZIP Tallahassee, FL. 32317

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-02

Date

Daytime Phone #

(850)

942-2537

CR2E034 (9/01)