

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L11571

1. Entity Name

EQUITABLE MANAGEMENT CORP.

Principal Place of Business

9881 113TH ST N
119
SEMINOLE FL 33772
US

Mailing Address

P O BOX 3607
SEMINOLE FL 33775
US

2. Principal Place of Business

9857 113TH ST. NORTH

3. Mailing Address

Suite, Apt. #, etc.

Apt. 113

City & State

SEMINOLE, FL

Zip

33772 PINELLAS

Country

Country

4. FEI Number 59-1201255

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WERLY, ALBERT C.
6641 CENTRAL AVE.
ST. PETERSBURG FL 33710

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 \$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 PST
NAME UNDERWOOD, BETTY LOU
STREET ADDRESS 9881 113TH ST., N., #119
CITY-ST-ZIP SEMINOLE FL

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ 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: Betty Lou Underwood | PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BETTY LOU UNDERWOOD

3/13/2001

Date

727-393-5241

Daytime Phone #

0327160

CR2E034 (10/00)

FILED
Mar 16, 2001 8:00 am
Secretary of State

03-16-2001 90026 043 ***150.00



DO NOT WRITE IN THIS SPACE