

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L15115

1. Entity Name

50 CENTRAL GROUP, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90029 022 ***150.00

Principal Place of Business

Mailing Address

5005 CENTRAL AVE.
ST. PETERSBURG FL 33710

5005 CENTRAL AVE.
ST. PETERSBURG FL 33710-8240

2. Principal Place of Business

1123 ASHBOURNE CIRCLE

3. Mailing Address

1123 ASHBOURNE CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NEW PORT RICHEY FL.

City & State

NEW PORT RICHEY FL.

4. FEI Number

59-2969232

Applied For

Not Applicable

Zip

Country

34655

PASCO

Zip

Country

34655

PASCO

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROULEAU, DAVID D
5005 CENTRAL AVE
ST. PETERSBURG FL 33710

7. Name and Address of New Registered Agent

Name

DAVID D. ROULEAU

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

1123 ASHBOURNE CIRCLE

City

NEW PORT RICHEY

FL

Zip Code

34655

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

DAVID ROULEAU PRES.

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, 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

TITLE CPD ☒ Delete
NAME ROULEAU, DAVID D
STREET ADDRESS 5005 CENTRAL AVE
CITY-ST-ZIP ST. PETERSBURG FL

TITLE VSTD ☒ Delete
NAME ROULEAU, JEAN E
STREET ADDRESS 5005 CENTRAL AVE.
CITY-ST-ZIP ST. PETERSBURG 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 CPD ☒ Change ☐ Addition
NAME ROULEAU, DAVID D.
STREET ADDRESS 1123 ASHBOURNE CIRCLE
CITY-ST-ZIP NEW PORT RICHEY FL. 34655

TITLE VSTD ☐ Change ☐ Addition
NAME ROULEAU JEAN E.
STREET ADDRESS 1123 ASHBOURNE CIRCLE
CITY-ST-ZIP NEW PORT RICHEY FL. 34655

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

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

TITLE ☐ Change ☐ Addition
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

Date

4-3-2000

Daytime Phone #

727-580-7997

CR2E034 (9/99)