

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L40054

1. Entity Name

JON R. DEMING, P.A.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90027 044 ***150.00

Principal Place of Business

% JON R. DEMING
5245 RAMSEY WAY SUITE 6
FT MYERS FL 33907

Mailing Address

% JON R. DEMING
5245 RAMSEY WAY SUITE 6
FT MYERS FL 33907-2124

40043308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0159572

Applied For
Not Applicable

Zip

Country

Zip

Country

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

DEMING, JON R.
5245 RAMSEY WAY
SUITE 6
FT MYERS FL 33907

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, 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 P ☐ Delete
NAME DEMING, BARBARA J
STREET ADDRESS 5245 RAMSEY WAY STE #6
CITY-ST-ZIP FT MYERS FL

TITLE ☒ Change ☐ Addition
NAME 1501 CHARMONT PLACE
STREET ADDRESS FORT MYERS, FL 33919
CITY-ST-ZIP

TITLE VP ☒ Delete
NAME BRUNER, BETTY
STREET ADDRESS 1509 CHARMONT PLACE
CITY-ST-ZIP FT MYERS FL

TITLE ☐ Change ☒ Addition
NAME KEN DEMING
STREET ADDRESS 1477 SPINNAKER COURT
CITY-ST-ZIP HIGHLAND, MI 48356

TITLE ST ☒ Delete
NAME DEMING, BARBARA J.
STREET ADDRESS 5245 RAMSEY WAY STE. #6
CITY-ST-ZIP FT. MYERS FL

TITLE ☐ Change ☒ Addition
NAME LISA-DEMING
STREET ADDRESS 1501 CHARMONT PLACE
CITY-ST-ZIP FT. MYERS, FL 33919

TITLE D ☐ Delete
NAME DEMING, BARBARA J.
STREET ADDRESS 5245 RAMSEY WAY STE. #6
CITY-ST-ZIP FT. MYERS FL

TITLE ☒ Change ☐ Addition
NAME 1501 CHARMONT PLACE
STREET ADDRESS FORT MYERS, FL 33919
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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: Barbara J. Deming
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4-20-2000 (941) 275-1040
Daytime Phone #

CR2E034 (9/99)