

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
 04-10-2001 90030 013 ***150.00

0030315

DOCUMENT # L41053

1. Entity Name
BANNER OUTLET, INC.

Principal Place of Business
106 PALM HARBOUR BLVD
PANAMA CITY FL 32408
US

Mailing Address
106 PALM HARBOUR BLVD
PANAMA CITY FL 32408
US

C0043938



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
106 PALM HARBOUR BLVD.
 Suite, Apt. #, etc.

3. Mailing Address
106 PALM HARBOUR BLVD.
 Suite, Apt. #, etc.
PANAMA CITY BEACH, FL.

City & State
PANAMA CITY BEACH, FL

City & State

4. FEI Number **59-2985197**

Applied For
 Not Applicable

Zip
32408

Country
USA

Zip
32408

Country
USA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

HARRIS, BETTY
106 PALM HARBOUR BLVD
PANAMA CITY BEACH FL 32408

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
DPS
HARRIS, BETTY
106 PALM HARBOUR BLVD
PANAMA CITY BEACH FL ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
HARRIS, JOSEPH
106 PALM HARBOUR BLVD
PANAMA CITY BEACH FL ☐ Delete

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

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☐ Delete

TITLE
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 STREET ADDRESS
 CITY-ST-ZIP
☐ 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 J. Harris **Betty J. Harris 4-3-01**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

850-234-1017

Daytime Phone #

CR2E034 (10/00)