

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L58819

1. Entity Name

HARDEE POWER I, INC.

FILED
May 06, 2000 8:00 am
Secretary of State

05-06-2000 90267 001 *1,650.00

Principal Place of Business

Mailing Address

C/O D. E. SCHWARTZ
702 N. FRANKLIN ST.
TAMPA FL 33602-4418
US

C/O D. E. SCHWARTZ
P.O. BOX 111
TAMPA FL 33601-0111
US

11908



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

c/o D. E. SCHWARTZ

3. Mailing Address

Suite, Apt. #, etc.

702 N. FRANKLIN ST.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

4. FEI Number

59-3003578

Applied For

Not Applicable

Zip

33602-4429

Country

US

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

MCDEVITT, S M
702 N FRANKLIN ST
TAMPA FL 33602

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 PD ☐ Delete
NAME LUDWIG, R. E
STREET ADDRESS 702 N FRANKLIN ST
CITY-ST-ZIP TAMPA FL 33602-4418

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

TITLE TD ☐ Delete
NAME GILLETTE, G. L.
STREET ADDRESS 702 N. FRANKLIN ST.
CITY-ST-ZIP TAMPA FL 33602-4418

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

TITLE S ☐ Delete
NAME SCHWARTZ, D. E.
STREET ADDRESS 702 N FRANKLIN ST
CITY-ST-ZIP TAMPA FL 33602

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

TITLE D ☐ Delete
NAME EUSTACE, R. K
STREET ADDRESS 702 N FRANKLIN ST
CITY-ST-ZIP TAMPA FL 33602-4418

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

TITLE V ☐ Delete
NAME MILLER, L A
STREET ADDRESS 702 N FRANKLIN ST
CITY-ST-ZIP TAMPA FL 33602-4418

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

TITLE V ☐ Delete
NAME JENNINGS, G. D (JR)
STREET ADDRESS 702 N FRANKLIN ST
CITY-ST-ZIP TAMPA FL 33602-4418

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP TAMPA FL 33602-4429

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

Daytime Phone #

D.E. Schwartz 4/27/00 813-225-1808

CR2E034 (9/99)