

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L85547

1. Entity Name

MAGICOLOR GRAPHIC DESIGN & PRINTING SERVICES, IN

Principal Place of Business

Mailing Address

16956 MCGREGOR BLVD.
UNIT 1
FORT MEYRES FL 33908
US

P.O BOX 476
SANIBEL FL 33957-0476
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0201972

Applied For

Not Applicable

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

MILLER, MARLOW
3730 AGATE CT
SANIBEL FL 33957

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 D ☐ Delete
NAME TOLLETTE, THOMAS A.
STREET ADDRESS 705 S NEWPORT
CITY-ST-ZIP TAMPA FL

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

TITLE D ☐ Delete
NAME MILLER, MARLOW L JR
STREET ADDRESS 3730 AGATE COURT
CITY-ST-ZIP SANIBEL FL

TITLE DVS ☒ Change ☐ Add
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP ☒ Delete
NAME STONE, BRIDGIT M
STREET ADDRESS 16956-1 MCGREGOR BLVD
CITY-ST-ZIP FT. MEYERS FL 33908

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

TITLE S ☒ Delete
NAME MILLER, MICHELE
STREET ADDRESS 4901 CHALET GARDENS RD, #109
CITY-ST-ZIP FITCHBURG WI 53722

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

TITLE V ☒ Delete
NAME JOHNSON, BRENDA H
STREET ADDRESS 9416 BEVERLY LANE
CITY-ST-ZIP SANIBEL FL

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

TITLE T ☐ Delete
NAME MILLER, MARLOW L III
STREET ADDRESS 15461 RIVER-BY ROAD
CITY-ST-ZIP FORT MYERS FL

TITLE OPT ☒ Change ☐ Add
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
Marlow Miller III, President

Date 01/26/00

Daytime Phone # 941/437-1222