## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED May 18, 2000 8:00 am Secretary of State **DOCUMENT # M82167** 1. Entity Name B & D CORPORATION OF FLORIDA, INC. 05-18-2000 90308 019 \*\*\*158.75 Principal Place of Business Mailing Address 4015 E. HILLSBOROUGH AVE. P.O. BOX 290175 TAMPA FL 33687-0175 TAMPA FL 33610 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State Applied For City & State 4. FEI Number 59-2889452 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAVIS. ELAINE M. Street Address (P.O. Box Number is Not Acceptable) 3909 N. STANLEY RD. PLANT CITY FL 33565 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) FILE NOW!!! FEE IS \$150.00 -9.-This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PDT Change ☐ Addition TITLE TITLE ☐ Delete DAVIS, OLIVER WAYNE NAME NAME STREET ADDRESS 3909 N. STANLEY RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANT CITY FL 33565 ☐ Change ☐ Addition TITLE KARIE L. FRENCH NAME 24231 TWIN LAKE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAND O' LAKES FL CITY-ST-ZIP VDS ☐ Change Addition ... Delete TITLE DAVIS. ELAINE M. NAME 3909 N. STANLEY RD. STREET ADDRESS STREET ADDRESS PLANT CITY FL 33565 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE TITLE BAUCOM, JAMES L NAME NAME STREET ADDRESS STREET ADDRESS 413 DEER PARK AVE CITY-ST-ZIP CITY-ST-ZIP TEMPLE TERRACE FL 33617 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 all other like empowered.

13. (1 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Department of the Treasury

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Internal Revenue Service

Date of this notice:

Form:

U/953-46/-9533/-/U 25931 261 00094409

# M 82/67 AR. 27, 2000

MAR.

59-2889452

Taxpayer Identifying Number Tax Period:

> For assistance you may cail us at:

> 1-800-829-1040

B & D CORP OF FL INC B & D IGA PO BOX 290175 33687-0175758

Or you may write to us at the address shown at the left. If you write, be sure to attach the bottom part of this notice.

## NOTICE OF ACCEPTANCE AS AN S-CORPORATION

YOUR ELECTION TO BE TREATED AS AN S-CORPORATION WITH AN ACCOUNTING PERIOD OF DECEMBER IS ACCEPTED. THE ELECTION IS EFFECTIVE BEGINNING JAN. 1, 2000, SUBJECT TO VERIFICATION IF WE EXAMINE YOUR RETURN.

THE TAX YEAR TO WHICH IT APPLIES, BUT BEFORE THE END OF THAT TAX YEAR, OR THE ELECTION WAS MADE AFTER THE 15TH DAY OF THE THIRD MONTH OF THE TAX YEAR TO WHICH IT APPLIES, BUT BEFORE THE END OF THAT TAX YEAR, OR THE ELECTION WHEN SUBMITTED WAS INCOMPLETE, AND REQUESTED INFORMATION WAS RECEIVED AFTER THE FILING PERIOD. IN EITHER CASE, YOUR ELECTION IS INVALID FOR THE TAX YEAR REQUESTED AND HAS THEREFORE, BEEN TREATED AS THOUGH IT WERE MADE FOR THE NEXT TAX YEAR.

PLEASE KEEP THIS NOTICE IN YOUR PERMANENT RECORDS AS VERIFICATION OF YOUR ACCEPTANCE AS AN S-CORPORATION.

IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE OR THE ACTIONS WE HAVE TAKEN, PLEASE WRITE TO US AT THE ADDRESS SHOWN ABOVE. IF YOU PREFER, YOU MAY CALL US AT THE IRS TELEPHONE NUMBER LISTED IN YOUR LOCAL DIRECTORY. AN EMPLOYEE THERE MAY BE ABLE TO HELP YOU, HOWEVER, THE OFFICE AT THE ADDRESS SHOWN ON THIS NOTICE IS MOST FAMILIAR WITH YOUR CASE.

IF YOU WRITE TO US, PLEASE PROVIDE YOUR TELEPHONE NUMBER AND THE MOST CONVENIENT TIME FOR US TO CALL SO WE CAN CONTACT YOU TO RESOLVE YOUR INQUIRY. PLEASE RETURN THE BOTTOM PART OF THIS NOTICE TO HELP US IDENTIFY YOUR CASE.

THANK YOU FOR YOUR COOPERATION.

To make sure that IRS employees give courteous responses and correct information to taxpayers, a second IRS employee sometimes listens in on telephone calls. Overlay 5 Form 8489 (Rev.8-91) Keep this part for your records

Return this part to us with your check or inquiry

Your telephone number

Best time to call

592889452 RD

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INTERNAL REVENUE SERVICE ATLANTA GA 39901