

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99188

1. Entity Name

JOY OF GREECE, INCORPORATED

FILED
Apr 14, 2001 8:00 am
Secretary of State

04-14-2001 90008 048 ***150.00

0624749

Principal Place of Business
542 MAIN ST
DUNEDIN FL 34698
US

Mailing Address
16607 WINDSOR DR
LUTZ FL 33549
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
342 MAIN ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DUNEDIN FL

City & State

4. FEI Number 59-2916491

Applied For

Not Applicable

Zip

34698

Country

US

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WOLLETT, FRANKLYN J., ESQ.
2790 SUNSET POINT ROAD
CLEARWATER FL 34619

7. Name and Address of New Registered Agent

Name

JOYCE C LUTZ

Street Address (P.O. Box Number is Not Acceptable)

16607 WINDSOR PK DR

City

LUTZ

FL

Zip Code

33549

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

4/9/01

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

TITLE PST
NAME LUTZ, JOYCE C. ☐ Delete
STREET ADDRESS 16607 WINDSOR PARK DRIVE
CITY-ST-ZIP LUTZ FL

TITLE D
NAME LUTZ, JOYCE C. ☐ Delete
STREET ADDRESS 16607 WINDSOR PARK DRIVE
CITY-ST-ZIP LUTZ FL

TITLE D ☒ Delete
NAME LUTZ, JOSEPH C.
STREET ADDRESS 16607 WINDSOR PARK DRIVE
CITY-ST-ZIP LUTZ FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition
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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:

Joyce C Lutz
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/01
Date

727(333)2731
Daytime Phone #

CR2E034 (10/00)