

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003898

1. Entity Name

EASY STREET ENTERPRISES, INC.

Principal Place of Business

2111 SARAZEN DRIVE
ORLANDO FL 32808

Mailing Address

P O BOX 580021
ORLANDO FL 32858-0021

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

59-3657363

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIBSON-PORTER, JO ANN
2111 SARAZEN DRIVE
ORLANDO FL 32808

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

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GIBSON-PORTER, JOANN
STREET ADDRESS 2111 SARAZEN DRIVE
CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE PM
NAME ☒ Change ☐ Addition

TITLE VD
NAME LLOYD, DONNA L
STREET ADDRESS 2111 SARAZEN DRIVE
CITY-ST-ZIP ORLANDO FL 32808 ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE VD
NAME LLOYD, MARK A
STREET ADDRESS 5904-D MAUSSER DR
CITY-ST-ZIP ORLANDO FL 32822 ☐ Delete

TITLE TD
NAME GIBSON, MARK A ☒ Change ☐ Addition

TITLE ☐ Delete

TITLE SD
NAME LEFFLER, BEVERLY
STREET ADDRESS 1161 WHITESELL DR.
CITY-ST-ZIP WINTER PARK, FL 32789 ☐ Change ☒ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

TITLE ☐ Change ☐ Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] (407) 735-4887

FILED
Sep 10, 2001 8:00 am
Secretary of State

09-10-2001 90005 007 ****70.00



DO NOT WRITE IN THIS SPACE

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CR2037 (5/01)