

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90077 030 ****61.25

DOCUMENT # N06385

1. Entity Name

DOWNTOWN BARTOW, INCORPORATED

Principal Place of Business

Mailing Address

**100 E MAIN ST
BARTOW FL 33830
US**

**P O BOX 1351
BARTOW FL 33831
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

59-2618876

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

**JORDAN, MARY C
100 E MAIN ST
BARTOW FL 33830**

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

Mary C Jordan **Mary C Jordan, Exec. Dir.** **2/6/02**
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

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 **TD** ☐ Delete
NAME **GUFFEY, KAREN**
STREET ADDRESS **125 E MAIN ST**
CITY-ST-ZIP **BARTOW FL 33830**

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

TITLE **VD** ☐ Delete
NAME **SOTO, RICK**
STREET ADDRESS **415 E. MAIN ST.**
CITY-ST-ZIP **BARTOW FL 33830**

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

TITLE **SD** ☐ Delete
NAME **STASIAK, ANITA**
STREET ADDRESS **600 N. BROADWAY AVE.**
CITY-ST-ZIP **BARTOW FL 33830**

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

TITLE **D** ☐ Delete
NAME **CLARK, ANGIE**
STREET ADDRESS **55 E STANFORD ST**
CITY-ST-ZIP **BARTOW FL 33830**

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

TITLE **D** ☐ Delete
NAME **COOK, JAMES**
STREET ADDRESS **1375 N. BROADWAY AVE.**
CITY-ST-ZIP **BARTOW FL 33830**

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

TITLE **PD** ☐ Delete
NAME **CLARK, JEFF**
STREET ADDRESS **62 4TH ST. NW**
CITY-ST-ZIP **WINTER HAVEN FL 33881**

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

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:

Karen Guffey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/6/02 **863-533-3131**

CR2E037 (9/01)

Attachment

Buddam

D
Hardee, Tim
650 E. Main St.
Bartow, FL 33830

N06385

D
Holcomb, Linda
190 S. Florida Ave.
Bartow, FL 33830

D
James, John
305 E. Main St.
Bartow, FL 33830

D
Perdue, Pam
215 E. Main St.
Bartow, FL 33830