

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004092

1. Entity Name

SKIDMORE ASSOCIATION, INC.

FILED
Feb 03, 2000 8:00 am
Secretary of State

02-03-2000 90023 003 ****61.25

Principal Place of Business

Mailing Address

199 AVENUE K, SE
WINTER HAVEN FL 33880

82 JENNI ASHLEY CT
WINTER HAVEN FL 33884-3044
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3246546

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TOUCHTON, JOHN R
199 AVENUE K, SE
WINTER HAVEN FL 33880

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

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 DVP ☐ Delete
NAME TOUCHTON, JOHN R
STREET ADDRESS 74 RYANN NICOLE COURT
CITY-ST-ZIP WINTER HAVEN FL 33884

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

TITLE D ☐ Delete
NAME TOUCHTON, DEBRA A
STREET ADDRESS 74 RYANN NICOLE COURT
CITY-ST-ZIP WINTER HAVEN FL 33884

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

TITLE S ☒ Delete
NAME RIZER, CHRISTOPHER
STREET ADDRESS 31 SKIDMORE ROAD
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE Secretary ☒ Change ☐ Addition
NAME Patty Moore
STREET ADDRESS 90 James Scott Court
CITY-ST-ZIP Winter Haven, FL 33884

TITLE P ☐ Delete
NAME MOORE, GARY
STREET ADDRESS 90 JAMES SCOOT COURT
CITY-ST-ZIP WINTER HAVEN FL 33884

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 90 James Scott Court
CITY-ST-ZIP

TITLE DT ☐ Delete
NAME KOK, CYNTHIA C
STREET ADDRESS 82 JENNI ASHLEY CT
CITY-ST-ZIP WINTER HAVEN FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE CHANGED

1-28-00

863-326-1409

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)