

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State

03-06-2001 90014 009 ****61.25

DOCUMENT # N94000002175

1. Entity Name

TAMPA BAY FLORIDA UNIT WBCCI, INC.

Principal Place of Business

Mailing Address

908 S FORK CIR
 MELBOURNE FL 32901
 US

908 S FORK CIR
 MELBOURNE FL 32901
 US

31680



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

6411 MORNAY DR

3. Mailing Address

6411 MORNAY DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FL

City & State

TAMPA, FL

4. FEI Number

59-6212215

Applied For

Not Applicable

Zip

33615-3425

Country

HILLSBOROUGH

Zip

33615-3425

Country

HILLSBOROUGH

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

BECK, JOHN
908 S FORK CIR
MELBOURNE FL 32901

Name **SHIRES, JANET**

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

6411 MORNAY DR

City **TAMPA**

FL

Zip Code

33615-3425

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

Janet Shires Treasurer

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/1/2001

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

TITLE ☐ Delete
 NAME **STD**
 STREET ADDRESS **BECK, JOHN**
 CITY-ST-ZIP **908 SOUTH FORK CIR**
MELBOURNE FL 32901

TITLE ☐ Delete
 NAME **PD**
 STREET ADDRESS **KURTZ, GEORGE**
 CITY-ST-ZIP **3029 BROOKFIELD LANE**
CLEARWATER FL 33761

TITLE ☐ Delete
 NAME **VPD**
 STREET ADDRESS **BLUM, DAVE**
 CITY-ST-ZIP **5329 EAGLES NEST ROAD**
FRUITLAND PARK FL 34731

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **T**
 STREET ADDRESS **SHIRES, JANET**
 CITY-ST-ZIP **6411 MORNAY DR**
TAMPA, FL 33615-3425

TITLE ☒ Change ☐ Addition
 NAME **P**
 STREET ADDRESS **BLUM, DAVE**
 CITY-ST-ZIP **5329 EAGLES NEST ROAD**
FRUITLAND PARK FL 34731

TITLE ☒ Change ☐ Addition
 NAME **VP**
 STREET ADDRESS **HERMAN, ROBERT**
 CITY-ST-ZIP **2092 CULBREATH RD, C-12**
BROOKSVILLE, FL 34602

TITLE ☐ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **Harrold Heath**
 CITY-ST-ZIP **586 Whispering Lane Blvd**
Tarpon Springs FL 34689

TITLE ☐ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **Derry Honaker**
 CITY-ST-ZIP **1308 W Redbud St**
Plant City FL 33566

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **Ralph Sparks**
 CITY-ST-ZIP **2755 Curlew Rd #145**
Palm Harbor FL 34684

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:

Janet Shires Treasurer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/1/2001

Daytime Phone

CR2E037 (10/00)