

2000 UNIFORM BUSINESS REPORT (UBR)

083000

DOCUMENT # N95000003846 (1)

1. Entity Name

NARCONON FLORIDA, INC.

(address and officer change)

Principal Place of Business

2702 Whitney Road
Clearwater, Florida
33760 USA

Mailing Address

Same

2. Principal Place of Business

2702 Whitney Road
Suite, Apt. #, etc.

3. Mailing Address

same

Suite, Apt. #, etc.

City & State

Clearwater, Florida

City & State

Clearwater, Florida

Zip

33760

Country

USA

Zip

33760

Country

USA

4. FEI Number

59-3339111

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Perry, Charles
1100 Cleveland Street
Suite 900
Clearwater, Florida 34615

7. Name and Address of New Registered Agent

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 Charles Perry

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

(NOTE: Registered Agent signature required when reinstating)

6 July 2000

DATE

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, 2000 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	D	<input checked="" type="checkbox"/> Delete
NAME	Kerr, David L	
STREET ADDRESS	300 No Osceola Ave., Apt 5-C	
CITY-ST-ZIP	Clearwater, FL 33755	<input type="checkbox"/> Delete
TITLE	P/D	
NAME	Witter, Debra D	
STREET ADDRESS	2041 Lakewood Drive	
CITY-ST-ZIP	Dunedin, Florida 34698	<input type="checkbox"/> Delete
TITLE	VP/D	
NAME	Witter, William P	
STREET ADDRESS	2041 Lakewood Drive	
CITY-ST-ZIP	Dunedin, Florida 34698	<input type="checkbox"/> Delete
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VP/S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Alderman, Cheryl A	
STREET ADDRESS	2702 Whitney Road	
CITY-ST-ZIP	Clearwater, FL 33760	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Debra D. Witter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Debra D. Witter

727-536-3656 6 July 2000

Date

Daytime Phone #

CR2E034 (9/99)