

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000002550

1. Entity Name

SEVILLE IMPROVEMENT BOARD INCORPORATED

Principal Place of Business

226 E INTENDENCIA ST
PENSACOLA FL 32501-6138

Mailing Address

226 E INTENDENCIA ST
PENSACOLA FL 32501-6138

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

59-3453987

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

DAUGHTRY, DENISE
226 E INTENDENCIA ST
PENSACOLA FL 32501-6138

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

TITLE S D
NAME DAUGHTRY, DENISE
STREET ADDRESS 226 E INTENDENCIA ST
CITY-ST-ZIP PENSACOLA FL 32501-6138 ☐ Delete

TITLE T
NAME BROWN, WHIT
STREET ADDRESS 240 E INTENDENCIA ST
CITY-ST-ZIP PENSACOLA FL 32501-6138 ☒ Delete

TITLE T
NAME DAUGHTRY, DAVE
STREET ADDRESS 226 E INTENDENCIA ST
CITY-ST-ZIP PENSACOLA FL 32501-6138 ☐ Delete

TITLE T
NAME YOUNG, JACQUELINE
STREET ADDRESS 131 CALLE DE SANTIAGO
CITY-ST-ZIP PENSACOLA FL 32501 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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: *Denise Cheryl Daughtry* 7/25/01 455-0914 850

FILED
Jul 31, 2001 8:00 am
Secretary of State

07-31-2001 90013 030 ****61.25

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DO NOT WRITE IN THIS SPACE

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CP2E037 (5/01)