

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004657

1. Entity Name

GENERATION SUCCESS, INC. ✓

**FILED**  
**Jul 17, 2000 8:00 am**  
**Secretary of State**

07-17-2000 90076 005 \*\*\*\*61.25

Principal Place of Business

3238 EAST HIGHWAY 390  
PANAMA CITY FL 32405

Mailing Address

3238 EAST HIGHWAY 390  
PANAMA CITY FL 32405

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3527728

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

RAMSEY, JOHN  
5131 E. 10TH STREET  
PANAMA CITY FL 32404

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

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 13, 2000 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	DP	<input type="checkbox"/> Delete
NAME	RAMSEY, JOHN R	
STREET ADDRESS	5131 E 10TH ST	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	DS	<input type="checkbox"/> Delete
NAME	MOUNT, WENDI	
STREET ADDRESS	5300 ARRO WHEAT BLVD	
CITY-ST-ZIP	YOUNGSTOWN FL 32466	
TITLE	D	<input type="checkbox"/> Delete
NAME	IRELAND, TAMMY	
STREET ADDRESS	2816 BRADINGTON AVE	
CITY-ST-ZIP	PANAMA CITY FL 32405	
TITLE	D	<input type="checkbox"/> Delete
NAME	RAMSEY, JAMES	
STREET ADDRESS	5129 E 10TH ST	
CITY-ST-ZIP	PANAMA CITY FL 32404	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	DEAL, STEPHEN	
STREET ADDRESS	7120 CAMPFLOWERS RD	
CITY-ST-ZIP	YOUNGSTOWN FL 32466	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*President John R. Ramsey*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-10-00 (850) 271-9647

CF2E037 (5/00)