

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000004649

1. Entity Name  
PASCO BIG BOOK INC.

Principal Place of Business Mailing Address  
11529-C SR 52 11529-C SR 52  
HUDSON FL 34669 HUDSON FL 34669

2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State  
Zip Country Zip Country

## 6. Name and Address of Current Registered Agent

EDMONSTONE, CHARLES A  
9520 BRUSH LANE  
HUDSON FL 34667

FILED  
00 DEC -7 PM 5: 08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DO NOT WRITE IN THIS SPACE  
05/30/00 90007 000 25  
4. FEL Number 59-3563489  
Applied For Not Applicable  
5. Certificate Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
Name Gary Zunt  
Street Address (P.O. Box Number is Not Acceptable)  
7913 Butler Ave  
City Hudson FL Zip Code 34667

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 *Gary Zunt* Gary Zunt 5-12-2000  
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 \$5.00 May Be Added to Fees  
Trust Fund Contribution. ☐ Make Check Payable to Department of State

## 10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	NONE			
D	Charles A. Edmonstone	9520 Brush Lane	Hudson FL 34667	<input type="checkbox"/> Delete
D	Gary Zunt	7913 Butler Ave	Hudson FL 34667	<input type="checkbox"/> Delete
D	Cindy Ames	10038 Brunswick Ln	Port Richey FL 34668	<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete
				<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	REINSTATEMENT			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	SP			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	600003509446--9			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	-12/21/00--01002--006			<input type="checkbox"/> Change <input type="checkbox"/> Addition
	****175.00 ****175.00			<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> 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: *GARY ZUNT* 5-12-2000 863 8790  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #