

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000006088

1. Entity Name

SOUL ENDEAVOR, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90058 020 ****61.25

Principal Place of Business

Mailing Address

% MAEDA L. JONES
5752 GRAND CANYON DRIVE
ORLANDO FL 32810

% MAEDA L. JONES
5752 GRAND CANYON DRIVE
ORLANDO FL 32810-3231

2. Principal Place of Business

5770 Dolphin Dr
Suite, Apt. #, etc.

3. Mailing Address

5770 Dolphin Dr
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Orlando FL

City & State

Orlando FL

4. FEI Number

59-3603018

Applied For

Not Applicable

Zip

32822

Country

USA

Zip

32822

Country

USA

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

JONES, MAEDA L
5752 GRAND CANYON DRIVE
ORLANDO FL 32810

Name

Maeda L. Jones

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

5770 Dolphin Dr

City

Orlando

FL

Zip Code

32822

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
JONES, MAEDA L
5752 GRAND CANYON DRIVE
ORLANDO FL 32810 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GROSECLOSE, KATHY
1601 ACE PARK DRIVE
ORANGE CITY FL 32763 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Anne Tanner
5770 Dolphin Dr
Orlando FL 32822 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
GROSECLOSE, CLAUDE D
1601 ACE PARK DRIVE
ORANGE CITY FL 32763 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Ingrid Matenge
2834 N. Powers Dr. #104
Orlando FL 32818 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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☐ 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: Maeda L. Jones 5/17/00 407-384-7005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)