

2001 UNIFORM BUSINESS REPORT (UBR)

0004843

DOCUMENT # P00000007880

1. Entity Name

LA CLASE DIVERTIDA, INC.

FILED

01 MAY -1 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

150 S PALMETTO AVE
DAYTONA BEACH FL 32114

Mailing Address

150 S PALMETTO AVE
DAYTONA BEACH FL 32114

2. Principal Place of Business

1703 Anniston Avenue

3. Mailing Address

1703 Anniston Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Holly Hill, Florida

City & State

Holly Hill, Florida

4. FEI Number

59-3629413

Applied For

Not Applicable

Zip

32117

Country

Volusia

Zip

32117

Country

Volusia

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TUMBLESON, J DOYLE
150 S PALMETTO AVE
DAYTONA BEACH FL 32114

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

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, 2001 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, P
NAME GAMACHE, DALE ☐ Delete
STREET ADDRESS 1703 ANNISTON AVE
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE D, T, S
NAME GAMACHE, ROBIN ☐ Delete
STREET ADDRESS 1703 ANNISTON AVE
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE 000004161810-00 ☐ Change ☐ Addition
NAME -05/08/01--01051--009
STREET ADDRESS *****150.00 *****150.00
CITY-ST-ZIP

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

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

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CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

Dale Gamache

Dale Gamache

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01
Date

904/252-1561
Daytime Phone #

CR2E034 (10/00)

SP