

3/12/01-90500-033-\$150.00-\$150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000011295

1. Entity Name
RENT TO OWN PASCO, INC.

Principal Place of Business
4813 TROUBLE CREEK RD.
NEW PORT RICHEY FL 34652

Mailing Address
4813 TROUBLE CREEK RD.
NEW PORT RICHEY FL 34652

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 SEP 24 PM 3:13



DO NOT WRITE IN THIS SPACE

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 59-3622314

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

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

☐ Delete

TITLE

NAME
PD JENKINS, RANDAL D
STREET ADDRESS
2118 WEST CASS STREET
CITY-STATE-ZIP
TAMPA FL 33606

☐ Delete

TITLE

NAME
VD WHITACRE, WHITNEY W
STREET ADDRESS
2118 WEST CASS STREET
CITY-STATE-ZIP
TAMPA FL 33606

☐ Delete

TITLE

NAME
SD BERNHARD, AMITY
STREET ADDRESS
2118 WEST CASS STREET
CITY-STATE-ZIP
TAMPA FL 33606

☐ Delete

TITLE

NAME
TD RAND, JAMIE
STREET ADDRESS
2118 WEST CASS STREET
CITY-STATE-ZIP
TAMPA FL 33606

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CITY-STATE-ZIP

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CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, and all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

7/18/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0100719 AV

CR2E034 (5/01)

00202
attachm
10259
D# P000001295

To: Division of Corporations

From: Rent To Own Pasco

Please waive the late fees for this corporation. We responded on time and our original check was cashed. The division had requested info on our registered agent, that we responded to, evidently you did not receive it.

We had originally tried to change our registered agent, but had not put another name in its place. When we received your correspondence we indicated that we would keep Spiegel and Utrera.

Enclosed is document # P00000011295

Thank you



Randal Jenkins

President

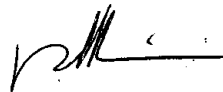
7/17/01

727-409-4663

RANRO1@AOL.COM

9/18/01- Spoke to your office again

They still show no receipt or
recording of our documents



RECEIVED
DIVISION OF CORPORATIONS
JUL 20 2001

RANRO1@AOL.COM