

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90195 007 ***150.00

DOCUMENT # P00000020198

1. Entity Name

MANGO MILLIE'S, INC.

Principal Place of Business

**271 ORANGE STREET
OZONA FL 34665-0**

Mailing Address

**P.O. BOX 425
OZONA FL 34660**

2. Principal Place of Business

403 ORANGE ST

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PAIM HARBOR FL

City & State

PAIM HARBOR FL

Zip

34683

Country

Pinellas

Zip

34683

Country

Pinellas

4. FEI Number

59-3628097

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name **DARRYL LANCE HOOKS**

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

403 ORANGE ST

City **PAIM HARBOR FL** Zip Code **34683**

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 **PSTD** ☐ Delete
NAME **HOOKS, DARRYL L**
STREET ADDRESS **271 ORANGE STREET**
CITY-ST-ZIP **OZONA FL 34665-0**

TITLE **V** ☐ Delete
NAME **FOILES, MILDRED R**
STREET ADDRESS **271 ORANGE STREET**
CITY-ST-ZIP **OZONA FL 34665-0**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 ☐ Change ☐ Addition
NAME
STREET ADDRESS **403 ORANGE ST**
CITY-ST-ZIP **PAIM HARBOR FL 34683**

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DARRYL LANCE HOOKS

Date **4/30/01** Daytime Phone # **727 771 2897**

CR2E034 (10/00)