2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000024040 1. Entity Name LLOYD S. SCHNEIDER, INC. Mailing Address Principal Place of Business 5110 MURIEL LANG NEW PORT RICHEY FL 34653 5110 MORIEL LANE NEW PORK RICHEY FL 34653

FILED Feb 16, 2001 8:00 am Secretary of State

02-16-2001 90017 023 ***150.00

/	_ #"							
1	Place of Business	3. Mailing Address	1, , 11.	л J				
Suite, Apt. #, etc. Suite, Apt. #, etc.				Cr7	DO NOT WRITE IN THIS SPACE			
City & Stat		New Port Rich	ley F	4	4. FELNumber 59-3627450	O N	pplied For ot Applicable	
344.	55 Country	34655	Country *		5. Certificate of Status Desired	\$8.75 Add	ditional ed	
	6. Name and Address of Current Re	egistered Agent		•	Name and Address of New Reg	istered Agent		
NEW PORT RICHEY FL 34653								
			City	J Por!	t Richey	FL Zip Cod	e 55	
8. The above	named entity submits this statement for t	he purpose of changing its r	registered office o	registered	l agent, or both, in the State of Florid	ia.	-	
SIGNATURIS	Signature, typed or studed name of registered agent and	state if applicable. (NOTE:	LLoyd S Registered Agent signat	· Suh ure required wh	neides en reinstating)	1-17-01 DATE		
Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2001 Make Check Payable			FEE IS \$150.00 1 Fee will be \$550.00 e to Department of State		10. Election Campaign Financ Trust Fund Contribution.	☐ Added)0 May Be d to Fees	
11.	OFFICERS AND DI	RECTORS	12.	- A	ADDITIONS/CHANGES TO OFFICE			
TITLE NAME	PVST SCHNEIDER, LLOYD S	☐ Delete	TITLE NAME	P _i vP Schne	dic lloyd'S	Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	STATE NEW PORT RICHEY FL 34653		STREET ADDRESS CITY-ST-ZIP	22 27 New {	Egret walk Court	34455		
TITLE	D	☐ Delete	TITLE	D.		Change	Addition	
NAMÉ	SCHNEIDER, LLOYD S	22 00.00	NAME	Bchn	eider, L Loyd 5.	, ^		
STREET ADDRESS .	5110 MURIEL LANE		STREET ADDRESS	2227	Egret work Cour	+		
CITY-ST-ZIP	NEW PORT RICHEY FL 34653		CITY-ST-ZIP	New	Port Richey - FL	34655	·	
TITLE		☐ Delete	TITLE	Sec.	مان مرمم مرا	: Change	Addition	
NAME STREET ADDRESS	•		NAME STREET ADDRESS	25 KM	eider, Margaret) •		
CITY-ST-ZIP			CITY-ST-ZIP	New	Egret Walk Crt.	34655		
TITLE		☐ Delete	TITLE	1000	BIT KILARY LI L.	☐ Change	☐ Addition	
NAME	٠,		NAME				_	
STREET ADDRESS		*	STREET ADDRESS					
CITY-ST-ZIP	*		CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME Street address	•		NAME STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition	
NAME			NAME				<u> </u>	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP	•		CITY-ST-ZIP		A 11000 (1100			
indicated of the cor	certify that the information supplied with th on this report or supplemental report is tr poration or the receiver or trustee empow or on an attachment with an address, with	ue and accurate and that my ered to execute this report a	y signature shall h	ave the san	ne legal effect as if made under oath	n; that I am an officer	or director	