2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000031892 **DOCUMENT #**



FILED Apr 28, 2003 8:00 am Secretary of State

1. Entity Name LUCKY DEVILS, INC.							04-28-2003 9	1827 001 ***:	150.00) .
Principal Place of Business 7701 CITRUS HILL LANE NAPLES FL 34109			Mailing Address 7701 CITRUS HILL LANE NAPLES FL 34109					111 53 111 1614 1 114 114		
2. Principal P	Place of Busin	ness	3. Mailing Addre	ss		_		(()		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE	IF MAKING CHA	NGES	
City & State			City & State			4. FEIN	4. FEI Number 65-1005373 Applied For Not Applied			plied For t Applicable
Zip Country		Zip	Zip Count		5. Certificate of Status Desired S8.75 Add Fee Require					
6. Name and Address of Current Registered Agent						7. Name	e and Address of New F	legistered Agent		
		<u></u>			Name					
LABADIE, KENT A 7701 CITRUS HILL LANE				Street Address (P.O. Box Number is Not Acceptable)						
NAPLES FL 34109					,			<u>-</u>		
s.					City			. FL Z	p Code	•
the obligat	named entit tions of regist	y submits this statement fo tered agent.	r the purpose of cha	inging its register	red office or regi	stered agent, o	or both, in the State of Flo	orida. I am familia	r with, a	and accept
Signature .	Signature typed	or printed name of registered agent	and title if applicable	(NOTE: Registers	red Agent signature reg	nired when reinstati		DATE		
							•			
										
Afte	r May 1, 200	!! FEE IS \$150.00 03 Fee will be \$550.00	I State	 		•	Election Campaign Fir Trust Fund Contributio	~ —		May Be to Fees
After Make Check	r May 1, 200	03 Fee will be \$550.00 o Florida Department of					Trust Fund Contributio	n. 🔲	Added	to Fees
After Make Check 10.	r May 1, 200 k Payable to	03 Fee will be \$550.00	DIRECTORS	11.	_ ,,			n. ICERS AND DIRE	Added	to Fees
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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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

239-588-4279