

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2001 8:00 am
Secretary of State
05-22-2001 90030 050 ***150.00

DOCUMENT # P00000036332
Entity Name
Blue Ribbon Animal Services, Inc.

Principal Place of Business
10411 S.W. 105th Street
Ocala, FL 34481

Mailing Address
10411 S.W. 105th Street
Ocala, FL 34481

Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

Country

4. FEI Number
59-3644337

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required


659415

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Florida Incorporators, Inc.
221 Brickell Avenue, Suite 900
Miami, Florida 33131

7. Name and Address of New Registered Agent
Name
Stanley A. Goldsmith
Street Address (P.O. Box Number is Not Acceptable)
1605 Main Street, Suite 1001
City
Sarasota FL Zip Code
34236

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  Stanley A. Goldsmith 4/27/01
(NOTE: Registered Agent signature required when reinstating)

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

1. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D, P, AS, T McCord, Daphne, D. 10411 S.W. 105th Street Ocala, FL 34481		D, VP, S, AT Nakonechny, Stephen W. 10411 S.W. 105th Street Ocala, FL 34481	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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:  04/30/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date