

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90004 037 ***150.00

DOCUMENT # P00000038429

1. Entity Name

ISLE N' PRINTS INCORPORATED

Principal Place of Business

**517 HEBRIDES CT.
APOKA FL 32712**

Mailing Address

**517 HEBRIDES CT.
APOKA FL 32712**

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

65-0995724

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HALL, LORI C
134 BUTTONWOOD DRIVE
KEY LARGO FL 33037**

Name **HALL, LORI C.**

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

517 HEBRIDES CT.

City **APOPKA**

FL

Zip Code **32712**

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

Lori C. Hall

Signature, typed or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

4/01/02

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HALL, LORI C**
CITY-ST-ZIP **134 BUTTONWOOD DRIVE
KEY LARGO FL 33037**

TITLE ☒ Change ☐ Addition
NAME **517 HEBRIDES CT.**
STREET ADDRESS **APOPKA, FL 32712**
CITY-ST-ZIP **APOPKA, FL 32712**

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HALL, DENNIS G**
CITY-ST-ZIP **134 BUTTONWOOD DRIVE
KEY LARGO FL 33037**

TITLE ☒ Change ☐ Addition
NAME **517 HEBRIDES CT.**
STREET ADDRESS **APOPKA, FL 32712**
CITY-ST-ZIP **APOPKA, FL 32712**

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CITY-ST-ZIP

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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:

Dennis G. Hall **Dennis G. Hall**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/02

DATE

407-880-4033

DAYTIME PHONE #

CR2E034 (9/01)