

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 11, 2003 8:00 am
Secretary of State

08-11-2003 90280 048 ***150.00

DOCUMENT # P00000045342

1. Entity Name
BERDINE CREEDY ORIGINALS, INC.



Principal Place of Business
5015 N.W. 71ST PLACE
GAINESVILLE FL 32653

Mailing Address
5015 N.W. 71ST PLACE
GAINESVILLE FL 32653

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 **59-3653461**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CREEDY, BERDINE
5015 N.W. 71ST PLACE
GAINESVILLE FL 32653

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREEDY, MICHAEL 5015 N.W. 71ST PLACE GAINESVILLE FL 32653 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CREEDY, BERDINE 5015 N.W. 71ST PLACE GAINESVILLE FL 32653 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Berdine Creedy

28 July 2003

(352) 336-2510

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

10 110802

Attachment

Business Bookkeeping Service, Inc.

Phone
352-375-2797

2711 NW 6th Street
Suite F
Gainesville, Fl. 32609

Fax
352-375-1706

July 24, 2003

TO WHOM IT MAY CONCERN:
RE: BERDINE CREEDY ORIGINALS, INC.
DOCUMENT #. P00000045342

PLEASE ACCEPT THIS PAYMENT OF \$150.00 WITH THIS UNIFORM BUSINESS
REPORT (UBR). THE REASON FOR THIS AMOUNT IS BECAUSE OUR CLIENT
"**BERDINE CREEDY ORIGINALS, INC**" NEVER RECEIVED THE FIRST UBR THAT WAS
MAILED OUT.

IF THERE IS ANY PROBLEMS PLEASE CONTACT OUR OFFICE AT THE ABOVE
NUMBERS. THANK YOU FOR YOUR ASSISTANCE WITH THIS PROBLEM.

Regina Sweat

REGINA SWEAT
BUSINESS BOOKKEEPING SERVICE, INC.