

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 22, 2001 8:00 am
Secretary of State

06-22-2001 90219 013 ***150.00

DOCUMENT # P00000050540

1. Entity Name

PRECISE DIRECT MAIL SERVICE, INC.

Principal Place of Business

Mailing Address

1500 S.E. 3RD CT., SUITE 208
 DEERFIELD BEACH FL 33441

1500 S.E. 3RD CT., SUITE 208
 DEERFIELD BEACH FL 33441

00058238



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1009699

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FINANCIAL FOUNDATIONS, INC.
 3150 SANDY RIDGE DRIVE
 CLEARWATER FL 33761

Name

KIRK ROUNTREE

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

1500 SE 3 CT STE 208

City

DEERFIELD BEACH

FL

Zip Code

33441

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

Kirk Rountree

(NOTE: Registered Agent signature required when resigning)

DATE

4-30-01

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, 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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	ROUNTREE, KIRK D	
STREET ADDRESS	1500 S.E. 3RD CT., SUITE 208	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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:

Kirk Rountree

4-30-01

Date

Daytime Phone #

CR2E034 (10/00)