

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000057679

1. Entity Name
PLEASURECRAFT FINANCING, INC.

Principal Place of Business
1517 JUBAL COURT
ORLANDO FL 32818

Mailing Address
1517 JUBAL COURT
ORLANDO FL 32818

2. Principal Place of Business

1517 JUBAL CT.

3. Mailing Address

1517 JUBAL CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
ORLANDO, FL

City & State
ORLANDO, FL

4. FEI Number
59-3653780

Applied For
Not Applicable

Zip
32818

Country
USA

Zip
32818

Country
USA

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

6. Name and Address of Current Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

7. Name and Address of New Registered Agent

Name
PATRICIA L. AHRENDT
Street Address (P.O. Box Number is Not Acceptable)
1517 JUBAL CT.
City
ORLANDO FL Zip Code
32818

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 PATRICIA L. AHRENDT Patricia L. Ahrendt 8/27/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE
NAME
D ANRENDT, PATRICIA L.
STREET ADDRESS
1517 JUBAL COURT
CITY-ST-ZIP
ORLANDO FL 32818 ☐ Delete

TITLE
NAME
D ANRENDT, LARRY P
STREET ADDRESS
1517 JUBAL COURT
CITY-ST-ZIP
ORLANDO FL 32818 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
AHRENDT, PATRICIA L. ☒ Change ☐ Addition
STREET ADDRESS
1517 JUBAL CT.
CITY-ST-ZIP
ORLANDO, FL 32818

TITLE
NAME
AHRENDT, LARRY T. ☒ Change ☐ Addition
STREET ADDRESS
1517 JUBAL CT.
CITY-ST-ZIP
ORLANDO, FL 32818

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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: PATRICIA L. AHRENDT Patricia L. Ahrendt 8/27/01 578-8565
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90007 042 ***550.00



DO NOT WRITE IN THIS SPACE

0014041 AV

CR2E034 (5/01)