

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000060414

1. Entity Name

BONES-N-STONES, INC.

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90497 043 ***150.00

Principal Place of Business

P.O. BOX 5274
LAKE WORTH FL 33466

Mailing Address

P.O. BOX 5274
LAKE WORTH FL 33466

2. Principal Place of Business

305 South Lake Dr.

Suite, Apt. #, etc.

Lantana, Florida

City & State

33462

Zip

33462

Country

USA

3. Mailing Address

305 South Lake Dr.

Suite, Apt. #, etc.

Lantana, Florida

City & State

33462

Zip

33462

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1017888

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAMPO, DORENE
401 SOUTH 'J' STREET
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name

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

305 South Lake Drive

City

Lantana

FL

Zip Code

33462

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

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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

TITLE D
NAME CAMPO, DORENE
STREET ADDRESS P.O. BOX 5274
CITY-ST-ZIP LAKE WORTH FL 33466

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TITLE
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Owner/President
NAME
STREET ADDRESS 305 South Lake Dr.
CITY-ST-ZIP Lantana FL 33462

☒ Change

☐ Addition

TITLE V
NAME Vice President
STREET ADDRESS Michael E. Dovey
CITY-ST-ZIP 305 South Lake Drive
Lantana FL 33462

☐ Change

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TITLE S
NAME Secretary
STREET ADDRESS Kimberly Campo
CITY-ST-ZIP Asbury Way
Boynton Beach, Florida, 33435

☐ 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: Dorene Campo Dorene Campo 1/3/01 (561) 582-4250

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0512380