

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90130 004 ***150.00

DOCUMENT # **P00000063457**

1. Entity Name

B+6 underground, inc



DO NOT WRITE IN THIS SPACE

20005374

2. Principal Place of Business

30420 BERMONT RD.

3. Mailing Address

30420 BERMONT RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Punta Gorda FL

City & State

Punta Gorda FL

4. FEI Number

05-1018604

Applied For

Not Applicable

Zip

33982

Country

Charlotte

Zip

33982

Country

Charlotte

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

William D. Scott

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

30420 BERMONT RD.

City

Punta Gorda

FL

Zip Code

33982

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

William D. Scott

01-06-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

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

TITLE	President - P
NAME	William D. Scott
STREET ADDRESS	30420 BERMONT RD.
CITY - ST - ZIP	Punta Gorda, FL 33982
TITLE	Vice President - V
NAME	James W. Amendola
STREET ADDRESS	1110 Harbor Green Rd.
CITY - ST - ZIP	Punta Gorda, FL 33983
TITLE	SECRETARY - S
NAME	A. DENISE SCOTT
STREET ADDRESS	30420 BERMONT RD.
CITY - ST - ZIP	Punta Gorda, FL 33982
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

William D. Scott

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-06-03

941-637-9736

Date

Daytime Phone #

CR2E034B (12/02)