

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000067666

1. Entity Name  
**BOLD MANUFACTURING, INC.**

**FILED**  
**Feb 08, 2001 8:00 am**  
**Secretary of State**

02-08-2001 90393 001 \*\*\*450.00

Principal Place of Business  
**1122 SE 12TH COURT  
CAPE CORAL FL 33904**

Mailing Address  
**1122 SE 12TH COURT  
CAPE CORAL FL 33904**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
**1126 SE 12th Ct.**

City & State  
**Cape Coral, FL**

4. FEI Number  
**65-1030944**

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

**WINER, STEVEN I  
12800 UNIVERSITY DRIVE SUITE 600  
FORT MYERS FL 33907**

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.

SIGNATURE \_\_\_\_\_ (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) ☐

**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

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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: **Curtis A. Bechdel, Sec/Treas** 1/5/01 941/574-5418

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)