FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2002 8:00 am
Secretary of State
05-07-2002 90227 028 ***150.00

DOCUMENT # P00000069387

1. Entity Name
SOUTHEAST RV RENTAL, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3315 US HWY 301 N
Suite, Apt. #, etc.
City & State: TAMPA FL
Zip: 33619 Country: USA

3. Mailing Address
3315 US Hwy 301 N
Suite, Apt. #, etc
City & State: TAMPA FL
Zip: 33615 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3675673 ☐ Applied For ☐ Not Applicable

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: ROGER P. CONLEY
Street Address (P.O. Box Number is Not Acceptable): 2401 MANATEE AVENUE WEST
City: BRADENTON FL Zip Code: 34205

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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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 / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP
D CONLEY, ROGER P. 2401 MANATEE AVENUE WEST BRADENTON FL 34205	
D CONLEY, JEFFREY A. 800 CORTEZ ROAD WEST BRADENTON FL 34207	
	DO NOT WRITE IN THIS SPACE

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

SIGNATURE: * _____ PRESIDENT 4/25/02 941-755-8531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #