

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90105 019 ***150.00

DOCUMENT # P00000069563

1. Entity Name

MEYER BROTHERS OF THE TREASURE COAST, INC.

Principal Place of Business

Mailing Address

**310 SOUTHWEST OCEAN BOULEVARD
STUART FL 34994**

**310 SOUTHWEST OCEAN BOULEVARD
STUART FL 34994**

2. Principal Place of Business

3. Mailing Address

354 Garden Blvd.
Suite, Apt. #, etc.

354 Garden Blvd.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

Palm Beach Gardens, FL
Zip **33410** Country

Palm Beach Gardens, FL
Zip **33410** Country

4. FEI Number

65-1028440

Applied For

Not Applicable

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

Name **Reginald Meyer**
Street Address **416 Smiley Ct.**
City **Winter Haven** FL Zip Code **33884**

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 **Reginald Meyer**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/16/01

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

TITLE **P** ☐ Delete
NAME **MEYER, REGINALD**
STREET ADDRESS **310 SOUTHWEST OCEAN BOULEVARD**
CITY-ST-ZIP **STUART FL 34994**

TITLE ☒ Change ☐ Addition
NAME **Reginald Meyer**
STREET ADDRESS **416 Smiley Ct.**
CITY-ST-ZIP **Winter Haven, FL 33884**

TITLE **ST** ☐ Delete
NAME **MEYER, MARK**
STREET ADDRESS **310 SOUTHWEST OCEAN BOULEVARD**
CITY-ST-ZIP **STUART FL 34994**

TITLE ☒ Change ☐ Addition
NAME **Mark Meyer**
STREET ADDRESS **354 Garden Blvd.**
CITY-ST-ZIP **Palm Beach Gardens, FL 33410**

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **MEYER WINFRIED**
CITY-ST-ZIP **3726 CYPRESS ST. PALM BEACH GARDENS, FL 33410**

TITLE ☐ Change ☒ Addition
NAME **VP**
STREET ADDRESS **MEYER WINFRIED**
CITY-ST-ZIP **3726 CYPRESS ST. PALM BEACH GARDENS, FL 33410**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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

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: **Reginald Meyer**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/01

Date

Daytime Phone #

CR2E034 (10/00)