

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

0610276

DOCUMENT # P00000072336

1. Entity Name  
**FILLMAN ENTERPRISES INC**

05-15-2001 90025 013 \*\*\*150.00

Principal Place of Business Mailing Address  
**1371 HWY 19 SO 1371 HWY 19 SO**  
**PALATKA FL 32177 PALATKA FL 32177**

364487



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address  
 Suite, Apt. #, etc. Suite, Apt. #, etc.  
 City & State City & State  
 Zip Country Zip Country

4. FEI Number **59-3661788** Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent  
**FILLMAN, MARTIN**  
**1371 HWY 19 SO**  
**PALATKA FL 32177**

7. Name and Address of New Registered Agent  
 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 \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable.

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  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP  
 PVT **FILLMAN, MARTIN C** ☐ Delete  
**1371 HWY 19 SO**  
**PALATKA FL 32177**  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP  
 S **STRONG, JAMES** ☒ Delete  
**1371 HWY 19 SO**  
**PALATKA FL 32177**  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Change ☒ Addition  
 PVT **Fillman, Martin C.**  
**1371 Hwy 19 SO**  
**Palatka, FL 32177**  
 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  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☐ Addition

CR2E034 (10/00)

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: Christian Fillman (MARTIN FILLMAN) 4/28/01 (36) 325 0435  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #