

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2001 8:00 am
Secretary of State
 04-03-2001 90059 042 ***150.00

DOCUMENT # P00000077151

1. Entity Name
E H MEYER, INC.

Principal Place of Business
**1444 FIRST STREET
 SARASOTA FL 34236**

Mailing Address
**1444 FIRST STREET
 SARASOTA FL 34236**

2. Principal Place of Business
1275 2ND ST.
 Suite, Apt. #, etc.

3. Mailing Address
1275 2ND ST.
 Suite, Apt. #, etc.

City & State
SARASOTA

City & State
SARASOTA

4. FEI Number
65-1034120

Applied For
 Not Applicable

Zip
34236

Country

Zip
34236

Country

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

6. Name and Address of Current Registered Agent

**MEYER, ELISABETH
 1444 FIRST STREET
 SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name **ELISABETH MEYER**

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

1275 2ND ST.

City **SARASOTA**

FL

Zip Code **34236**

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

ELISABETH H. MEYER

Registered Agent 3-29-01
 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

TITLE **PVST** ☐ Delete
 NAME **MEYER, ELISABETH**
 STREET ADDRESS **1444 FIRST STREET**
 CITY-ST-ZIP **SARASOTA FL 34236**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PVST** ☒ Change ☐ Addition
 NAME **MEYER, ELISABETH**
 STREET ADDRESS **1275 2nd Street**
 CITY-ST-ZIP **SARASOTA FL 34236**

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

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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: *Elisabeth Meyer* **PVST**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELISABETH H. MEYER **3-29-01** **941955-1305**
 Date Daytime Phone #

CR2E034 (10/00)