

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 17, 2001 8:00 am**  
**Secretary of State**

UBR 01

**DOCUMENT # P00000077708**

**1. Entity Name**  
**TREASURE COAST EQUIPMENT RENTAL, INC.**

09-17-2001 90006 025 \*\*\*550.00

**Principal Place of Business**

**754 OLD DIXIE HWY.**  
**VERO BEACH FL 32960**

**Mailing Address**

**754 OLD DIXIE HWY.**  
**VERO BEACH FL 32960**

1



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

**65-1031728**

Applied For

Not Applicable

Zip

**32962**

Country

Zip

**32962**

Country

**5. Certificate of Status Desired**

☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**WILLINGHAM, JEFFERY L**  
**1326 16TH AVE.**  
**VERO BEACH FL 32960**

**7. Name and Address of New Registered Agent**

Name

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

**754 OLD DIXIE HWY**

City

**VERO BEACH**

FL

Zip Code

**32962**

**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**

*Jeffery L. Willingham*

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

(NOTE: Registered Agent signature required when reinstating)

**9/10/01**

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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** PD ☐ Delete  
**NAME** **FULMER, PHILIP R**  
**STREET ADDRESS** **8000 CHERRY LAKE RD.**  
**CITY-ST-ZIP** **GROVELAND FL 34736**

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

**TITLE** VD ☐ Delete  
**NAME** **WILLINGHAM, JEFFERY L**  
**STREET ADDRESS** **1326 16TH AVE.**  
**CITY-ST-ZIP** **VERO BEACH FL 32960**

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

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
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**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:**

*Jeffery L. Willingham*  
**JEFFERY L. WILLINGHAM**

**9/10/01**

Date

**561-562-7718**

Daytime Phone #

CR2E034 (5/01)