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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

02-13-2001 90043 003 ***150.00

DOCUMENT # P00000080169

1. Entity Name

BYRD INVESTMENT, INC.

Principal Place of Business

100 WALLACE AVENUE
 SUITE 250
 SARASOTA FL 34236

Mailing Address

100 WALLACE AVENUE
 SUITE 250
 SARASOTA FL 34236

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FEL Number

65-1051155

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WALTERS, DOUG EUGENE
 3345 C. MERIDIAN WAY NORTH
 NORTH PORT FL 33410

7. Name and Address of New Registered Agent

Name: Derek Byrd

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

70 Mitchell St. 100 Wallace Ave.

Suite 250

City: Saratoga NY 12866

FL

Zip Code: 34237

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 fee applicable.

(NOTE: Registered Agent signature required when reappointing)

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	D	☐ Delete
NAME	WALTERS, DOUG EUGENE	
STREET ADDRESS	3345 C. MERIDIAN WAY NORTH	
CITY-ST-ZIP	NORTH PORT FL 33410	
TITLE	D	☐ Delete
NAME	BYRD, DEREK ESO.	
STREET ADDRESS	100 WALLACE AVENUE SUITE 250	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☒ Change ☐ Addition
NAME		
STREET ADDRESS	70 Mitchell St.	
CITY-ST-ZIP	Saratoga NY 12866	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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: *

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941.954.3960

CR2E034 (10/00)