

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000085913

1. Entity Name

BRAUSTI, INC.

Principal Place of Business

4335 FLORIDA TOWN RD.  
PACE FL 32571

Mailing Address

4335 FLORIDA TOWN RD.  
PACE FL 32571

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

ANDREWS, EVERETT D  
4335 FLORIDA TOWN RD.  
PACE FL 32571

4. FEI Number

59-3707437

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

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

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

(NOTE: Registered Agent signature required when reinstating)

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 ☐ 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

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 Pres., Sec., Treas, Dir ☐ Change ☒ Addition

NAME Everett D. Andrews  
STREET ADDRESS 5466 W. Spencerfield Rd.  
CITY-ST-ZIP Pace, FL 32571

TITLE V.Pres. ☐ Change ☒ Addition

NAME Brent W. McLamore  
STREET ADDRESS 2721 Burlwood Dr.  
CITY-ST-ZIP Milton, FL 32570

TITLE V. Pres. ☐ Change ☒ Addition

NAME Dominic Creea  
STREET ADDRESS 8521 San Juan Calzada  
CITY-ST-ZIP Pensacola, FL 32507

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 #

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90082 034 \*\*\*150.00

00064016



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

0612141

4-30-01 (850)994-9915