

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 03, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000098342**1. Entity Name
LANCE E. POTTER INC.

Principal Place of Business 1367 SOUTHWEST 8TH STREET BOCA RATON FL 33486	Mailing Address 1367 SOUTHWEST 8TH STREET BOCA RATON FL 33486
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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
65-1057463
Applied For
Not Applicable5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**CORPORATION SERVICE COMPANY**
1201 HAYS STREET**TALLAHASSEE FL**
323012525 US**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 **LANCE POTTER**

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

(NOTE: Registered Agent signature required when reinstating)

04/03/2001

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	POTTER LANCE E	
STREET ADDRESS	1367 SOUTHWEST 8TH STREET	
CITY-ST-ZIP	BOCA RATON FL 33486	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE		☐ Change ☐ Addition
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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: Lance Potter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D

04/03/2001

Date

Daytime Phone #

CR2E034 (11/00)