

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90182 005 ***158.75

DOCUMENT # P00000100344

1. Entity Name

BAILEY'S EQUIPMENT COMPANY, INC.

Principal Place of Business

**1018 WEST CENTRAL AVE.
 BLOUNTSTOWN FL 32424**

Mailing Address

**1018 WEST CENTRAL AVE.
 BLOUNTSTOWN FL 32424**

00012696



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

19872 SR 20W

3. Mailing Address

19872 SR 20W

Suite, Apt. #, etc.

3

Suite, Apt. #, etc.

3

City & State

Blountstown, FL

City & State

Blountstown, FL

4. FEI Number

59-3678581

Applied For

☐ Not Applicable

Zip

32424

Country

US

Zip

32424

Country

US

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MCCORMICK, WINDY
 1018 WEST CENTRAL AVE.
 BLOUNTSTOWN FL 32424**

7. Name and Address of New Registered Agent

Name

Arthur Bailey, Sr

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

19572 SR 71N

City

Blountstown, FL

FL

Zip Code
32424

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

Windy McCormick

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

(NOTE: Registered Agent signature required when reinstating)

1-23-01

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 **D** ☐ Delete
 NAME **BAILEY, ARTHUR SR.**
 STREET ADDRESS **HWY 71 NORTH**
 CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

TITLE **D** ☐ Delete
 NAME **BAILEY, ARTHUR JR.**
 STREET ADDRESS **WILLARD SMITH RD.**
 CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

TITLE **D** ☐ Delete
 NAME **MCCORMICK, WINDY**
 STREET ADDRESS **HWY 71 NORTH**
 CITY-ST-ZIP **BLOUNTSTOWN FL 32424**

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.** ☒ Change ☐ Addition
 NAME **Arthur Bailey, Sr**
 STREET ADDRESS **19572 SR 71N**
 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **V.P.** ☒ Change ☐ Addition
 NAME **Arthur Bailey, Jr.**
 STREET ADDRESS **16302 NW Willard Smith Rd**
 CITY-ST-ZIP **Blountstown, FL 32424**

TITLE **Secretary/Treasurer** ☒ Change ☐ Addition
 NAME **Windy McCormick**
 STREET ADDRESS **23382 NW Murdock Dr**
 CITY-ST-ZIP **Altha, FL 32421**

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

Arthur Bailey Sr. **Arthur Bailey Sr**

Date

1-23-01

Daytime Phone #

850 674-4356

CR2E034 (10/00)