

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90337 018 ***150.00

DOCUMENT # P00000102962

1. Entity Name
HUBBARD EXPRESS, INC.

Principal Place of Business Mailing Address
150 JOHN'S PASS BOARDWALK 150 JOHN'S PASS BOARDWALK
MADEIRA BEACH FL 33708 MADEIRA BEACH FL 33708

2. Principal Place of Business
150 John's Pass Boardwalk
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
Madeira Beach

City & State

4. FEI Number
59-3688809

Applied For
 Not Applicable

Zip Country
33708 Pinellas

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS NETWORK INC.
941 FOURTH STREET #200
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name **Patricia Hubbard**
 Street Address (P.O. Box Number is Not Acceptable)
150 John's Pass Boardwalk
 City **Madeira Beach FL** Zip Code **33708**

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 **Patricia Hubbard** **Patricia Hubbard C.F.O. 2/22/01**
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 **D** ☐ Delete
 NAME **HUBBARD, MARK F**
 STREET ADDRESS **150 JOHN'S PASS BOARDWALK**
 CITY-ST-ZIP **MADEIRA BEACH FL 33708**

TITLE **D** ☐ Delete
 NAME **MCDOLE, KATHLEEN H**
 STREET ADDRESS **150 JOHN'S PASS BOARDWALK**
 CITY-ST-ZIP **MADEIRA BEACH FL 33708**

TITLE **D** ☐ Delete
 NAME **HUBBARD, PATRICIA A**
 STREET ADDRESS **150 JOHN'S PASS BOARDWALK**
 CITY-ST-ZIP **MADEIRA BEACH FL 33708**

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 **D/P** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D/V/S** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D/V/T** ☒ 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: **Patricia Hubbard** **Patricia Hubbard C.F.O. 2/22/01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
727-397-8211

CR2E034 (10/00)