

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000111711

FILED  
Apr 21, 2002 8:00 AM  
Secretary of State

Entity Name: SOUTH POLE SMOOTHIES FRANCHISE SYSTEMS, INC.

**Current Principal Place of Business:**

2780 E FOWLER AVENUE #161  
TAMPA, FL 33612

**New Principal Place of Business:**

2200 E FOWLER AVENUE  
TAMPA, FL 33612

**Current Mailing Address:**

2780 E FOWLER AVENUE #161  
TAMPA, FL 33612

**New Mailing Address:**

PO BOX 11705  
TAMPA, FL 33680

FEI Number: 59-3695607

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HANNA, LEMAR & MORRIS, C.P.A'S., P.A.  
6508 E FOWLER AVE  
TAMPA, FL 33617 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: THODE, DANIEL  
Address: 5428 DEERBROOKE CREEK CIR #6  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: THODE, SUSAN  
Address: 1000 WEST HORACIO STREET  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: THODE, DANIEL  
Address: 1214 E. POWHATAN AVE.  
City-St-Zip: TAMPA, FL 33604

Title: D (X) Change ( ) Addition  
Name: THODE, SUSAN  
Address: 2692 ENTERPRISE RD. #1502  
City-St-Zip: CLEARWATER, FL 33759

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DANIEL THODE

D

04/21/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date