2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 03, 2001 8:00 am Secretary of State DOCUMENT # P01000001711 FARMER MIKE'S TRANSPORT, INC. 05-03-2001 90968 046 ***150.00 Principal Place of Business Mailing Address 12780 MAIDEN CANE LANE 12780 MAIDEN CANE LANE BONITA SPRINGS FL 34135 **BONITA SPRINGS FL 34135** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number x Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CLEVENGER, MICHAEL J Street Address (P.O. Box Number is Not Acceptable) 12780 MAIDEN CANE LANE **BONITA SPRINGS FL 34135** City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution, Added to Fees X (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME CLEVENGER, MICHAEL J STREET ADDRESS STREET ADDRESS 12780 MAIDEN CANE LANE CITY-ST-7IP CITY-ST-ZIP **BONITA SPRINGS FL 34135** TITLE □ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME ... NAME - -STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change □ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

AttAthment FPOROCOCOINII"

546/39

JOHN D. SPEAR
BOARD CERTIFIED REAL ESTATE ATTORNEY
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LAW OFFICES OF

JOHN D. SPEAR

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April 27, 2001

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

RE: FARMER MIKE'S TRANSPORT, INC.

Gentlemen:

Enclosed is the 2001 Uniform Business Report for the above-captioned corporation, together with a check in the amount of \$150.00 for the filing fee.

Sincerely,

LAW OFFICES OF JOHN D. SPEAR

James K. Kerr, Esquire

JEK/cam Enclosures

cc: Michael J. Clevenger

Reclared is the 2001 Uniform Business Regards θ , $A_{\rm C}$ as a recapitorical convention, regardize with a chosenia are entended of \$170.00 seems filter.

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