

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90041 014 ***150.00

DOCUMENT # P01000009314

1. Entity Name

LASTINGER AGENCY, INC.

Principal Place of Business

23 N.W. 33RD COURT

SUITE 8

GAINESVILLE FL 32608

32607

Mailing Address

23 N.W. 33RD COURT

SUITE 8

GAINESVILLE FL 32608

32607

2. Principal Place of Business

23 NW 33rd COURT

Suite, Apt. #, etc.

SUITE 8

City & State

GAINESVILLE FL

Zip

32607

Country

3. Mailing Address

23 NW 33rd COURT

Suite, Apt. #, etc.

SUITE 8

City & State

GAINESVILLE FL

Zip

32607

Country

ALACHUA



DO NOT WRITE IN THIS SPACE

4. FEI Number

593686790

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

LASTINGER, ROCKY W

23 N.W. 33RD COURT

SUITE 8

GAINESVILLE FL 32608

32607

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Rocky W. LASTINGER (OWNER - President)

1-11-02

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, 2002 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 NAME ☐ Delete

PRESIDENT / OWNER
 ROCKY W. LASTINGER
 21550 NW 87 AVE ROAD
 MICANOPY FL 32667

TITLE NAME ☐ Delete

SECRETARY / TREASURER
 VELVA LOUISE LASTINGER
 21550 NW 87 AVE RD
 MICANOPY FL 32667

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS

CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☒ Change ☒ Addition

SECRETARY / TREASURER
 VELVA LOUISE LASTINGER
 21550 NW 87 AVE ROAD
 MICANOPY FL 32667

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition

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:

Rocky W. LASTINGER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-11-02 352 2193495

Date

Daytime Phone #

CR2E034 (9/01)