

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

09-08-2003 90324 029 ***550.00

0081841 AV

DOCUMENT # P01000026443

1. Entity Name

SOUTHERN BUCKS INCORPORATED



Principal Place of Business
**10328 IBIS RESERVE CIRCLE
WEST PALM BEACH FL 33412**

Mailing Address
**10328 IBIS RESERVE CIRCLE
WEST PALM BEACH FL 33412**



2. Principal Place of Business

3. Mailing Address

1512 Villa Juno Dr N

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Juno Beach

City & State

City & State

FL

Zip

Country

Zip

Country

33408

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-1094681**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCGARRAUGH, KELLI
10328 IBIS RESERVE CIRCLE
WEST PALM BEACH FL 33412**

Name

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

1512 Villa Juno Dr N

City

Juno Beach

FL

Zip Code

33408

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Kelli McGarraugh

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

(NOTE: Registered Agent signature required when reinstating)

8/21/03

DATE

FILE NOW!!! FEE IS \$550.00.
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
P	MCGARRAUGH, JASON T	10328 IBIS RESERVE CIRCLE	WEST PALM BEACH FL 33412	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VPT	MCGARRAUGH, KELLI J	10328 IBIS RESERVE CIRCLE	WEST PALM BEACH FL 33412	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
S	MCGARRAUGH, ELAINE	11521 TIMBER BROOK DRIVE	WALDORF MD 20601	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Kelli McGarraugh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/21/03

Date

561 4306423

Daytime Phone #

CR2E034 (4/03)