

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91647 040 ***150.00

DOCUMENT # P01000047704

1. Entity Name

BIG-TEN POOLS, INC. OF SARASOTA COUNTY

Principal Place of Business

**2506 HERMITAGE BLVD
 VENICE FL 34292**

Mailing Address

**2506 HERMITAGE BLVD
 VENICE FL 34292**

2. Principal Place of Business

2506 HERMITAGE BLVD

3. Mailing Address

P.O. Box 28

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

N/A

City & State

VENICE, FL

City & State

VENICE, FL

4. FEI Number

65-1108931

Applied For

Not Applicable

Zip **34292** Country **US**

Zip **34284** Country **U.S.**

5. Certificate of Status Desired ☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLER, JEFFERY A
 2506 HERMITAGE BLVD
 VENICE FL 34292**

7. Name and Address of New Registered Agent

Name **JEFFERY A. MILLER**

Street Address (P.O. Box Number is Not Acceptable)
2506 HERMITAGE BLVD

City **VENICE**

FL

Zip Code **34292**

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

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	D	<input type="checkbox"/> Delete
NAME	MILLER, JEFFERY A	
STREET ADDRESS	2506 HERMITAGE BLVD	
CITY-ST-ZIP	VENICE FL 34292	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

JEFFERY A. MILLER B.S.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

5-1-02 941-468-4193

CR2E034 (9/01)