


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-16-2003 90233 047 ***158.75

DOCUMENT # P02000096456	
1. Entity Name Stubbie Shirt Pub, Inc.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9 West Univ. Ave.	3. Mailing Address 9 West Univ. Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State Gainesville, FL	City & State Gainesville, FL	4. FEI Number 52-2376921	Applied For <input type="checkbox"/> Not Applicable
Zip 32601	Country USA	Zip 32601	Country USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Gar B. Hoflund
Street Address (P.O. Box Number is Not Acceptable) 541 NE Boulevard
B
City Gainesville
State FL
Zip Code 32601

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 **Gar B. Hoflund**

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

(NOTE: Registered Agent signature required when re-registering)

4-10-03

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE P	NAME President	TITLE P	NAME Gar B. Hoflund	TITLE P	NAME Gar B. Hoflund
STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard
CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601
TITLE D	NAME Director of Operations	TITLE D	NAME Berkeley Hoflund	TITLE D	NAME Berkeley Hoflund
STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard	STREET ADDRESS 541 NE Boulevard
CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601	CITY-ST-ZIP Gainesville, FL 32601
TITLE	NAME	TITLE	NAME	TITLE	NAME
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Gar B. Hoflund**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-03 352-372-4100

Date

Daytime Phone #

CR2E034B (12/02)