

2000 UNIFORM BUSINESS REPORT (UBR)

00295

DOCUMENT # P40493

1. Entity Name

ROOT COMPANY

FILED

00 FEB 24 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

525 FENTRESS BLVD.
DAYTONA BEACH FL 32114

Mailing Address

PO BOX 2860
DAYTONA BEACH FL 32120-2860
US

2. Principal Place of Business

275 Clyde Morris Blvd.
Suite, Apt. #, etc.

3. Mailing Address

275 Clyde Morris Blvd.
Suite, Apt. #, etc.

City & State

Ormond Beach, FL
Zip Country
32174 USA

City & State

Ormond Beach, FL
Zip Country
32174 USA

4. FEI Number

59-3133336

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VOGES, WILLIAM J.
525 FENTRESS BLVD.
DAYTONA BEACH FL 32114

7. Name and Address of New Registered Agent

Name

William J. Voges

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

275 Clyde Morris Blvd.

City

Ormond Beach

FL

Zip Code

32174

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 William J. Voges William J. Voges, Registered Agent 1/10/2000

Signature, typed or printed name of registered agent and date 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, 2000 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	T	<input type="checkbox"/> Delete
NAME	DITTBENNER, EILEEN	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	V	<input type="checkbox"/> Delete
NAME	MARONEY, PHILIP	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	S	<input type="checkbox"/> Delete
NAME	PETERS, MELISSA	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	DP	<input type="checkbox"/> Delete
NAME	VOGES, WILLIAM J.	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	GRAHAM, SUSAN ROOT	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	
TITLE	D	<input type="checkbox"/> Delete
NAME	ROOT, JOHN S	
STREET ADDRESS	525 FENTRESS BLVD.	
CITY-ST-ZIP	DAYTONA BEACH FL 32114	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	SEE ATTACHED SHEET FOR EXPLANATION.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	100003158381--7	
CITY-ST-ZIP	-03/06/00--01099--024	
TITLE	***150.00 ***150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

Philip Maroney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Philip Maroney, Vice Pres., 2/2/2000 (904) 671-4888

CR2E034 (9/99)

P46493

**THE ADDRESS FOR ALL OF THE LISTED OFFICERS AND DIRECTORS
OF THIS ENTITY HAS CHANGED!**

THE NEW ADDRESS IS:

*275 Clyde Morris Blvd.
Ormond Beach, FL 32174*

PLEASE CHANGE YOUR RECORDS ACCORDINGLY.

If you have any questions concerning the aforementioned change, please feel free to contact Kira H. Soto at (904) 671-4908.

Thank you!