

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90104 028 ***150.00

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DOCUMENT # P92000003966

1. Entity Name

THE MULBERRY BUSH, INC.

Principal Place of Business

**11333 SW 10TH LN
 GAINESVILLE FL 32607
 US**

Mailing Address

**11333 SW 10TH LANE
 GAINESVILLE FL 32607
 US**

508723



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

(Suite, Apt. #, etc.)

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3150329

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CROUSHORE, CYNTHIA L
 11333 SW 10TH LANE
 GAINESVILLE FL 32607**

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

T
**NESMITH, KIMBERLY R
 8207 SW 43RD PL
 GAINESVILLE FL 32608**

☐ Delete

☐ Change ☐ Addition

VP
**SNYDER, JANE B.
 1207 SW 112TH STREET
 GAINESVILLE FL**

☐ Delete

☐ Change ☐ Addition

P
**CROUSHORE, CYNTHIA
 11333 SW 10TH LANE
 GAINESVILLE FL**

☐ Delete

☐ Change ☐ Addition

S
**LOWERY, MARLENE
 3111 NW 58TH BLVD
 GAINESVILLE FL 32608**

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

☐ Delete

☐ Change ☐ Addition

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)