

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 21, 2001 8:00 am
Secretary of State

05-21-2001 90408 027 ***150.00

DOCUMENT # **P93600062538**

1. Entity Name

Citrus Floors Inc

Principal Place of Business

**3300 Heathgate Ct.
Orlando, FL 32812**

Mailing Address

**3300 Heathgate Ct.
Orlando, FL 32812**

C0068874

2. Principal Place of Business

3300 Heathgate Ct.

Suite, Apt. #, etc.

3. Mailing Address

3300 Heathgate Ct.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3156564

Applied For

Not Applicable

Zip

32812

Country

Zip

32812

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**Peggy L. Cox
3300 Heathgate Ct.
Orlando, FL 32812**

7. Name and Address of New Registered Agent

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, 2001 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 **PP** ☐ Delete
NAME **Cox, Peggy L.**
STREET ADDRESS **3300 Heathgate Ct.**
CITY-ST-ZIP **Orlando, FL 32812**

TITLE **VP** ☐ Delete
NAME **Burkett, Timothy**
STREET ADDRESS **122 Garrison Drive**
CITY-ST-ZIP **Sanford, FL 32771**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **VP**
STREET ADDRESS **Burkett, Timothy**
CITY-ST-ZIP **122 Garrison Drive**
Sanford, FL 32771

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

Peggy L. Cox

Peggy L. Cox

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-01

Date

407/482-0668

Daytime Phone #

CR2E034 (11/00)