

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90013 034 ***150.00

DOCUMENT # P93000003896

1. Entity Name

BREEZY HILL ENTERPRISES, INC.

Principal Place of Business

**147 CYPRESS LANE
 OLDSMAR FL 34677**

Mailing Address

**147 CYPRESS LANE
 OLDSMAR FL 34677**

2. Principal Place of Business

449 8th Ave. South

3. Mailing Address

449 8th Ave South

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Naples, FL

City & State

Naples, FL

Zip

34102

Country

Collier

Zip

34102

Country

Collier

4. FEI Number

59-3289153

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BURKHART, JOHN W
 147 CYPRESS LANE
 OLDSMAR FL 34677**

7. Name and Address of New Registered Agent

Name **John W. Burkhart**

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

449 8th Ave South

City

Naples

FL

Zip Code

34102

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

John W. Burkhart

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/26/01

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 **CD** ☐ Delete
 NAME **BURKHART, JOHN W**
 STREET ADDRESS **147 CYPRESS LANE**
 CITY-ST-ZIP **OLDSMAR FL 34677**

TITLE **PD** ☐ Delete
 NAME **BURKHART, GLENDA K**
 STREET ADDRESS **147 CYPRESS LN**
 CITY-ST-ZIP **OLDSMAR FL 34677**

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 **Chairman** ☒ Change ☐ Addition
 NAME **John W. Burkhart**
 STREET ADDRESS **449 8th Ave South**
 CITY-ST-ZIP **Naples, FL 34102**

TITLE **President** ☒ Change ☐ Addition
 NAME **Glenda K. Burkhart**
 STREET ADDRESS **449 8th Ave South**
 CITY-ST-ZIP **Naples, FL 34102**

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
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TITLE ☐ Change ☐ Addition
 NAME
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 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:

John W. Burkhart
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/26/01

Daytime Phone #

860-435-1200

CR2E034 (10/00)