

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 05, 2000 8:00 am  
Secretary of State

06-05-2000 90016 011 \*\*\*150.00

DOCUMENT # P93000011021

1. Entity Name

CHECKER CAB OF FT. WALTON & DESTIN, INC.

Principal Place of Business

Mailing Address

113 WINDHAM  
FT. WALTON BEACH FL 32548  
US

703 W. 13TH ST  
PANAMA CITY FL 32401-2211

2. Principal Place of Business

3. Mailing Address

113 Windham Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
Ft Walton Beach, FL

4. FEI Number

59-3162010

Applied For

Not Applicable

Zip

Country

Zip

Country

32548

USA

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

JOHNS, GEORGE J  
703 W. 13TH STREET  
PANAMA CITY FL 32401

Name

William K Gast

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

818 Tanager Rd

City

Ft Walton Beach, FL

FL

Zip Code

32547

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 K Gast

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

(NOTE: Registered Agent Signature required when reinstating)

04/28/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ~~XX~~Delete  
NAME JOHNS, GEORGE J  
STREET ADDRESS 703 W 13TH ST  
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE VTS ~~XX~~Delete  
NAME JOHNS, RUTH M  
STREET ADDRESS 703 W. 13TH ST  
CITY-ST-ZIP PANAMA CITY FL 32401

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P/VP/T/S/D ☐ Change ~~XX~~Addition  
NAME William K Gast  
STREET ADDRESS 818 Tanager Rd  
CITY-ST-ZIP Ft Walton Beach, FL 32547

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

William K Gast / Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/28/00

Date

850-244-4491

Daytime Phone #

CF 1334 (9/99)