

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000015940

1. Entity Name

WIDE-SPREAD, INC.

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90079 033 \*\*\*150.00

Principal Place of Business

Mailing Address

16504 ROUND OAK DRIVE  
TAMPA FL 33618

P.O. BOX 273077  
TAMPA FL 33688-3077

049939

2. Principal Place of Business

8499 GULF Blvd

3. Mailing Address

P.O. BOX 6163

Suite, Apt. #, etc.

#1306 unit B

Suite, Apt. #, etc.

City & State

Navarre Beach

City & State

Navarre

Zip

Florida

Country

32566

Zip

FLORIDA

Country

32566

4. FEI Number

59-3200626

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KINCHEN, KAY N  
16504 ROUND OAK DRIVE  
TAMPA FL 33618

7. Name and Address of New Registered Agent

Name

KAY N. KINCHEN

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

8499 GULF Blvd - unit 1306

City

Navarre Beach FL

Zip Code

32566

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]*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-2000

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 D ☒ Delete  
NAME KINCHEN, KAY  
STREET ADDRESS 16504 ROUND OAK DRIVE  
CITY-ST-ZIP TAMPA FL 33618

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE (ALL) P.V.T.S.D. Corporations ☒ Change ☐ Addition  
NAME Kay N. Kinchen  
STREET ADDRESS 8499 GULF BLVD - unit 1306  
CITY-ST-ZIP Navarre Beach, FL 32566

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

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

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

TITLE ☐ Change ☐ Addition  
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

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-30-2000

Daytime Phone #

850-939-9544

CE02034 10/0001