

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000021378

1. Entity Name
BUCHANAN FARMS, INC.

FILED
Jul 20, 2000 8:00 am
Secretary of State

07-20-2000 90020 025 ***150.00

Principal Place of Business
15749 W. HWY 316
WILUSTON FL 32696
US

Mailing Address
788 M L K BLVD W
%808 WELLEN
SEFFNER FL 33584



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

4. FEI Number **59-3181126**
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

JOHNSON, LEONARD H
301 E. MERIDIAN AVE.
SUITE 314
DADE CITY FL 33525

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 _____ (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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	D BUCHANAN, SANDRA J 9712 HIDDEN COVE COURT TAMPA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-00
Date

Daytime Phone #

CR2E034 (5/00)

ATTACHMENT

P93000021378

ADD 68650

BUCHANAN FARMS, INC.
788 DR. MLK BLVD. WEST
SEFFNER, FLORIDA 33584

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July 12, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Buchanan Farms, Inc.
Document # : P93000021378

Dear Sir/Madam:

Please find enclosed our check for \$150.00 and our completed 2000 Uniform Business Report.

The reason we failed to file a timely report is that we never received the first notice in the mail. The enclosed "second notice" is the first and only correspondence we received pertaining to our 2000 Uniform Business Report.

Due to these circumstances and our timely payment history, we respectfully request that you accept the enclosed check, and abate all penalties associated with our failure to timely file our 2000 Uniform Business report.

Thank you for your consideration.

Respectfully submitted,


Sandra J.C. Buchanan
President

cc: file