

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000028001

1. Entity Name

THE REAGAN CORPORATION

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90034 006 ***150.00

Principal Place of Business

Mailing Address

4340 OLD DIXIE HWY
VERO BEACH FL 32967

4340 OLD DIXIE HWY
VERO BEACH FL 32967-6261

00040430



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0420123

Applied For
Not Applicable

Zip

Country

Zip

Country

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

PETERSEN, G R
3339 CARDINAL DRIVE
SUITE 200
VERO BEACH FL 32963

Name A. Ronald Hudson
Street Address (P.O. Box Number is Not Acceptable)
4235 27th Avenue
City Vero Beach FL Zip Code 32967

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 A. Ronald Hudson

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/25/2000

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME REAGAN, WILLIE C
STREET ADDRESS 5686 41ST STREET
CITY-ST-ZIP VERO BEACH FL

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

TITLE VP ☐ Delete
NAME BARRINER, HARDY C
STREET ADDRESS 4140 58TH AVE
CITY-ST-ZIP VERO BEACH FL

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

TITLE S ☐ Delete
NAME REAGAN, LUCINDA J
STREET ADDRESS 6237 W.FAYETTEVILLE ROAD
CITY-ST-ZIP RIVERDALE GA

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

TITLE T ☐ Delete
NAME WILLIAMS, HELEN G
STREET ADDRESS 4340 OLD DIXIE HIGHWAY
CITY-ST-ZIP VERO BEACH FL

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

TITLE D ☐ Delete
NAME THOMPSON, ERNESTINE
STREET ADDRESS 1025 -E MILL STREET
CITY-ST-ZIP MELBOURNE FL

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

TITLE D ☐ Delete
NAME LANE, LEE A
STREET ADDRESS 4236-31ST AVE
CITY-ST-ZIP VERO BEACH FL

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:

Helen Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-2000 (561) 567-1435
Date Daytime Phone #

CR2E034 (9/99)