

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000032611

1. Entity Name  
TRIPLE BEE LAND & CATTLE CO., INC.

**FILED**  
**Apr 17, 2001 8:00 am**  
**Secretary of State**

04-17-2001 90004 033 \*\*\*150.00

Principal Place of Business

4205 N.W. 61ST TERR  
GAINESVILLE FL 32606  
US

Mailing Address

4205 N.W. 61ST TERR  
GAINESVILLE FL 32606  
US

2. Principal Place of Business

RT 20 Bx 847  
Suite, Apt. #, etc.

3. Mailing Address

RT 20 Bx 847  
Suite, Apt. #, etc.

City & State

LAKE CITY, FL

City & State

LAKE CITY, FL

4. FEI Number

59-3180469

Applied For

Not Applicable

Zip

32055

Country

COL

Zip

32055

Country

COL

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

VAN ARSDALL, HOWARD E. JR.  
4205 NW 61ST TERR  
GAINESVILLE FL 32606

Name

HOWARD E. VAN ARSDALL, JR.

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

RT 20 Bx 847

City

LAKE CITY

FL

Zip Code

32055

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

Howard E. Van Arsdall

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

(NOTE: Registered Agent signature required when reinstating)

4/8/01

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, 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 PSTD ☐ Delete  
NAME VAN ARSDALL, HOWARD E. JR.  
STREET ADDRESS 4205 NW 61ST TERRACE  
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE V ☐ Delete  
NAME VAN ARSDALL, JEANNE H  
STREET ADDRESS 4205 NW 61ST TERR  
CITY-ST-ZIP GAINESVILLE FL 32606

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 ☐ 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

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:

HOWARD E. VAN ARSDALL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/08/01

Date

386-7554339

Daytime Phone #

CR2E034 (10/00)