

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2000 8:00 am**  
**Secretary of State**

01-21-2000 90106 006 \*\*\*150.00

**DOCUMENT #** P93000039936

1. Entity Name

METTLER POLO, INC.

Principal Place of Business

35 S BLVD OF PRESIDENTS  
SARASOTA FL 34236

Mailing Address

35 S BLVD. OF PRESIDENTS  
SARASOTA FL 34236

2. Principal Place of Business

1249 TALLEVAST RD

3. Mailing Address

1249 TALLEVAST RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SARASOTA, FL

City & State

SARASOTA, FL

4. FEI Number

65-0419571

Applied For

Not Applicable

Zip

34243

Country

USA

Zip

34243

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

METTLER, LOUIS P  
35 S BLVD OF PRESIDENTS  
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name BENJAMIN, ROBERT W.

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

200 SOUTH ORANGE AVE.

City SARASOTA

FL

Zip Code 34236

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

*Robert W. Ben*

3/3/00

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

(See criteria on back)

☐

10. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD  
NAME METTLER, LOUIS P  
STREET ADDRESS 604 NORSOTA WAY  
CITY - ST - ZIP SARASOTA FL

☐ Delete

TITLE VTSD  
NAME METTLER, KATHLEEN F  
STREET ADDRESS 604 NORSOTA WAY  
CITY - ST - ZIP SARASOTA FL

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPT  
NAME  
STREET ADDRESS 1249 TALLEVAST RD  
CITY - ST - ZIP SARASOTA FL 34243

☒ Change ☐ Addition

TITLE VPS  
NAME LOCKE, RON  
STREET ADDRESS 1249 TALLEVAST RD  
CITY - ST - ZIP SARASOTA FL 34243

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

☐ Change ☐ 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

Date

Daytime Phone #

5-5-00

941-358-7177

CR2E034 (9/99)