

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90146 041 ***150.00

DOCUMENT # P93000056140

1. Entity Name
S.V.P. MAINTENANCE & REPAIR INC.

Principal Place of Business

8330 ULMERTON RD
334
LARGO FL 33777
US

Mailing Address

9043 108TH AVENUE NORTH
LARGO FL 33777
US

2. Principal Place of Business

8380 ULMERTON RD.
Suite, Apt. #, etc.
334

3. Mailing Address

8380 ULMERTON RD
Suite, Apt. #, etc.
334

City & State

LARGO FL

City & State

LARGO FL

4. FEI Number

59-3194015

Applied For

Not Applicable

Zip

33771

Country

US

Zip

33771

Country

US

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

PRATHER, STEPHEN F
9043 108TH AVENUE NORTH
LARGO FL 34647

Name

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

16212 PEBBLEBROOK DR

City TAMPA

FL

Zip Code

33624

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

Stephen F Prather

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

(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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	PRATHER, STEPHEN F	
STREET ADDRESS	9043 108TH AVENUE NORTH	
CITY-ST-ZIP	LARGO FL 34647	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PRATHER, V L	
STREET ADDRESS	9043 108 AVE. N	
CITY-ST-ZIP	LARGO FL 34647	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	PRATHER, DAVE	
STREET ADDRESS	5991 67 AVE. N.	
CITY-ST-ZIP	PIN PK FL 33781	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16212 PEBBLEBROOK DR	ADDRESS
STREET ADDRESS	TAMPA FL 33624	
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	16212 PEBBLEBROOK DR	ADDRESS
STREET ADDRESS	TAMPA FL 33624	
CITY-ST-ZIP		
TITLE	SCOTT PRATHER - SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	16212 PEBBLEBROOK DR.	
STREET ADDRESS	TAMPA FL 33624	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Stephen F Prather

STEPHEN F PRATHER

4/27/01

727

391 7735

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)