

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000071849

1. Entity Name

FUTURES OF BOCA GRANDE, INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90120 033 ***150.00

Principal Place of Business
152 CARRICK BEND LANE
BOCA GRANDE FL 33921
US

Mailing Address
P O BOX 584
BOCA GRANDE FL 33921-0584
US

2. Principal Place of Business
16501 GULF SHORE DR.
Suite, Apt. #, etc.

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

City & State
BOCA GRANDE FL

City & State

Zip
33921-0584

Country
USA

Zip

Country

4. FEI Number 65-0442297

Applied For
Not Applicable

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

ITTERSAGEN, SCOTT D
% BATSEL MCKINLEY ITTERSAGEN & GUNDERSON
1861 PLACIDA RD., SUITE 104
ENGLEWOOD FL 34223

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 \$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	DP	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUNG, ELEANORE T		NAME		
STREET ADDRESS	152 CARRICK BEND LANE		STREET ADDRESS	16501 GULF SHORE DR	
CITY-ST-ZIP	BOCA GRANDE FL 33921		CITY-ST-ZIP		
TITLE	DVTS	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	YOUNG, ROBERT A		NAME		
STREET ADDRESS	152 CARRICK BEND LN		STREET ADDRESS	16501 GULF SHORE DR.	
CITY-ST-ZIP	BOCA GRANDE FL 33921		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: Robert A Young ROBERT A YOUNG

1-8-00

941 964.1024

Date

Daytime Phone #

CR2E034 (9/99)