

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2001 8:00 am
Secretary of State

03-07-2001 90613 018 ***150.00

DOCUMENT # P94000021970

1. Entity Name

FREEDOM - NO LIMIT, INC.

Principal Place of Business

**8181 COACH LIGHT WAY N
SEMINOLE FL 34646**

Mailing Address

**8181 COACH LIGHT WAY N
SEMINOLE FL 33776
US**

2. Principal Place of Business

8181 COACH LIGHT CIRCLE N

Suite, Apt. #, etc.

3. Mailing Address

8181 COACH LIGHT CIRCLE N

Suite, Apt. #, etc.

City & State

SEMINOLE FL

City & State

SEMINOLE FL

Zip

33776

Country

US

Zip

33776

Country

US

4. FEI Number

59-3231758

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WEBER, JAMES J SR
8181 COACH LIGHT WAY N
SEMINOLE FL 33776**

7. Name and Address of New Registered Agent

Name

PEGGY WEBER

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

8181 COACH LIGHT CIRCLE N

City

SEMINOLE

FL

Zip Code
33776

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

Peggy Weber
Signature of Registered Agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/02/01

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 **BP** ☒ Delete
NAME **WEBER, JAMES J SR**
STREET ADDRESS **8181 COACH LIGHT WAY N**
CITY-ST-ZIP **SEMINOLE FL 34646**

TITLE **DV** ☐ Delete
NAME **WEBER, JAMES J JR**
STREET ADDRESS **8181 COACH LIGHT WAY N**
CITY-ST-ZIP **SEMINOLE FL 34646**

TITLE **DST** ☐ Delete
NAME **WEBER, PEGGY**
STREET ADDRESS **8181 COACH LIGHT WAY N**
CITY-ST-ZIP **SEMINOLE FL 34646**

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 **DV** ☒ Change ☐ Addition
NAME **WEBER, JAMES J JR**
STREET ADDRESS **8181 COACH LIGHT CIRCLE N**
CITY-ST-ZIP **SEMINOLE FL 33776**

TITLE **DPST** ☒ Change ☐ Addition
NAME **WEBER, PEGGY**
STREET ADDRESS **8181 COACH LIGHT CIRCLE N**
CITY-ST-ZIP **SEMINOLE FL 33776**

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:

Peggy Weber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
PEGGY WEBER, as President

Date

Daytime Phone #

3/2/01 727-397-7790

CR2E034 (10/00)