

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000023266

1. Entity Name  
FLORIDA WEATHER, INC.

FILED  
Apr 05, 2001 8:00 am  
Secretary of State

04-05-2001 90089 034 \*\*\*158.75

Principal Place of Business  
1117 BEACH BLVD  
JACKSONVILLE BCH FL 32250  
US

Mailing Address  
1117 BEACH BLVD  
JACKSONVILLE BCH FL 32250  
US

00031467



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3232866

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

DOERR, STEPHEN E  
1117 BEACH AVENUE  
JACKSONVILLE BEACH FL 32250

Name Charles C Singleton Sr. (President)  
Street Address (P.O. Box Number is Not Acceptable)  
1117 - Beach Blvd  
City Jacksonville FL Zip Code 32250

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 *Charles C Singleton Sr* Charles C Singleton Sr (President) 4-3-01  
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 PTD ☒ Delete  
NAME DOERR, STEPHEN E  
STREET ADDRESS 1873 KINGS COURT  
CITY-ST-ZIP JACKSONVILLE BEACH FL 32250

TITLE PTDS ☒ Change ☐ Addition  
NAME Singleton, Charles C. Sr  
STREET ADDRESS 1317 8th ST North  
CITY-ST-ZIP Jacksonville, FL 32250

TITLE S ☐ Delete  
NAME SINGLETON, CHARLES C  
STREET ADDRESS 1317 8TH ST N  
CITY-ST-ZIP JACKSONVILLE BCH FL 32250

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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: *Charles C Singleton Sr*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Charles C Singleton Sr.

4-3-01 (904)  
249-1290  
Date Daytime Phone #

CR2E034 (10/00)