

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000026392

1. Entity Name

Rely Enterprises, Inc.

FILED

00 MAR -8 PM 4:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

3. Mailing Address

4189 E. Hillsborough Ave.
Suite # Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

Applied For

Tampa, FL

59-3295750

Not Applicable

Zip

Country

Zip

Country

33610

USA

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

Evelyn W. Larry
4189 E Hillsborough Ave.
Tampa, FL 33610

Name David Thomas

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

4189 E. Hillsborough Ave

City Tampa

FL

Zip Code 33610

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: *David A. Thomas*

03-03-08

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, 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 President
NAME Evelyn W. Larry
STREET ADDRESS 808 Windsor Circle
CITY-ST-ZIP Brandon, FL 33510 ☒ Delete

TITLE President
NAME David L. Thomas
STREET ADDRESS 4427 Cobie Drive
CITY-ST-ZIP Tampa, FL 33617 ☒ Change ☐ Addition

TITLE 1 VP
NAME David Thomas
STREET ADDRESS 4427 Cobie Drive
CITY-ST-ZIP Tampa, FL 33617 ☒ Delete

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

TITLE 2 VP
NAME Glenford E. McMahon
STREET ADDRESS 10908 N. 19th Street
CITY-ST-ZIP Tampa, FL 33617 ☒ Delete

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

TITLE VD
NAME Kristal C. Larry
STREET ADDRESS 808 Windsor Circle
CITY-ST-ZIP Brandon, FL 33510 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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: *David A. Thomas* 813 6262111
3-3-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)