

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90056 001 ***150.00

DOCUMENT # P94000027687

1. Entity Name

RON SCHULZ, INC.

Principal Place of Business

3085 MEYER DR
 SARASOTA FL 34239

Mailing Address

3085 MEYER DR
 SARASOTA FL 34239

2. Principal Place of Business

3. Mailing Address

4600 Longleaf Ln.
 Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota FL

City & State

Sarasota FL

4. FEI Number

65-0483526

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHULZ, RON
 3085 MEYER DR
 SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name: Schulz, Ron
 Street Address (P.O. Box Number is Not Acceptable): 4600 Longleaf Ln.
 City: Sarasota FL Zip Code: 34241

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: Laura J Schulz
 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, 2002 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
 NAME: SCHULZ, RON
 STREET ADDRESS: 3085 MEYER DR
 CITY-ST-ZIP: SARASOTA FL 34239 ☐ Delete

TITLE: D
 NAME: Schulz, Ron
 STREET ADDRESS: 4600 Longleaf Ln.
 CITY-ST-ZIP: Sarasota, FL 34241 ☒ Change ☐ Addition Address

TITLE: D
 NAME: SCHULZ, LAURA J
 STREET ADDRESS: 3085 MEYER DR
 CITY-ST-ZIP: SARASOTA FL 34239 ☐ Delete

TITLE: D
 NAME: Schulz, Laura J
 STREET ADDRESS: 4600 Longleaf Ln.
 CITY-ST-ZIP: Sarasota FL 34241 ☒ Change ☐ Addition Address

TITLE: DS
 NAME: SCHULZ, JIM
 STREET ADDRESS: 3085 MEYER DR
 CITY-ST-ZIP: SARASOTA FL 34239 ☐ Delete

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

TITLE:
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
☐ Delete

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

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☐ Delete

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☐ Change ☐ Addition

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)