

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000043793

1. Entity Name

PATTERN SETTER CHARTERS, INC.

FILED

Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90042 011 ***150.00

Principal Place of Business

Mailing Address

~~132 DAHL AVENUE~~
~~SEBASTIAN FL 32958~~
~~US~~

~~132 DAHL AVENUE~~
~~SEBASTIAN FL 32958-5622~~
~~US~~

2. Principal Place of Business

337 HARP ter

Suite, Apt. #, etc.

3. Mailing Address

337 HARP ter

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Sebastian FL

City & State

Sebastian FL

4. FEI Number

59-3251248

Applied For

Not Applicable

Zip

32958

Country

U.S.A.

Zip

32958

Country

U.S.A.

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

BRUGGER, GUSTAV J

~~132 DAHL AVENUE~~
~~SEBASTIAN FL 32958~~

337 HARP ter

SEBASTIAN FL 32958

Name

GUSTAV J. Brugger

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

337 HARP Ter

City

Sebastian

FL

Zip Code

32958

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

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
BRUGGER, GUSTAV J
132 DAHL AVE.
SEBASTIAN FL 32958-5622 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ 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:

Gustav J. Brugger

Gustav J. Brugger

PSTD 4/19/00

561-589-0008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)