

2000 UNIFORM BUSINESS REPORT (UBR)

10f3

DOCUMENT # **PC4000072079**

1. Entity Name

FORECKI ENTERPRISES, INC

Principal Place of Business

Mailing Address

612 LOIS AVE. N.

612 LOIS AVE. N.

Tampa, Fl. 33609

Tampa, Fl. 33609

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3270863

Applied For

Not Applicable

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

EICHOLTZ, KIRK D.
3001 N. ROCKY POINT DR. E
SUITE 200
Tampa, Fl. 33607

Name

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

City

FL

Zip Code

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 **Director** ☐ Delete
NAME **FORECKI, DEBORAH H.**
STREET ADDRESS **5700 MARINER DR. UNIT 204 W**
CITY-ST-ZIP **Tampa, Fl. 33609**

TITLE ☐ Change ☐ Addition
NAME **900003434489--6**
STREET ADDRESS **-10/23/00--01017--010**
CITY-ST-ZIP ******150.00 ****150.00**
☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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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:

DEBORAH H. FORECKI

10/12/00

(813) 289-1500

Date

Daytime Phone #

CR2E034 (9/99)

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FORECKI ENTERPRISES, INC.
dba: NEVADA BOB'S GOLF
612 LOIS AVE. N.
TAMPA, FL. 33609

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

October 12, 2000

Kristen Eckel
Document Specialist

RE: Your Letter Number: 000A00050813 Dated Sept. 27, 2000
Reference Number: P94000072079
2000 Uniform Business Report (UBR)

Enclosed please find the completed copy of the 2000 Uniform Business Report you sent me along with my check for \$150.00.

As indicated on the phone, I had originally filed this report and paid the fee on March 23, 2000, in my check #4979. I had assumed everything was current until I was reconciling my bank statement for July which I had done in September. In reviewing the checks outstanding from the prior months, I noticed that check #4979 was outstanding since March. As I looked into my check register, I saw it was made out to the Florida Department of State for the UBR 2000 report and called your office.

Your office informed me that they did not receive the report nor my check. I requested another copy of the report to prepare and have enclosed another check for \$150.00 for the filing of this report. Unfortunately, since the report is a single form, I did not make a copy for my records since I never had a problem like this before.

To verify that I did make the payment well ahead of time for this report, I have enclosed copies of my records as follows: