

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000081186

1. Entity Name

SOUTHWEST FLORIDA SEAFOOD, INC.

**FILED**  
**May 08, 2000 8:00 am**  
**Secretary of State**

05-08-2000 90002 015 \*\*\*150.00

Principal Place of Business

Mailing Address

~~645 SAN CARLOS BLVD~~  
~~FT MYERS FL 33902~~  
US

#1 MCDONALD'S CT  
WAYNESBORO VA 22980

2. Principal Place of Business

645 OLD SAN CARLOS BLVD.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FORT MYERS BEACH, FL

City & State

4. FEI Number

65-0531010

Applied For

Not Applicable

Zip

Country

33931

US

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

WHITESMAN, GUY E  
HENDERSON FRANKLIN STARNES & HOLT PA  
1715 MONROE ST  
FT MYERS FL 33901

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSTD  
HENDRICKS, RICHARD A  
#1 MCDONALD'S CT  
WAYNESBORO VA ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
CUSICK, G EDWARD  
505 WELLINGTON PL  
CHARLOTTESVILLE VA ☐ Delete

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

TITLE  
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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:

G. EDWARD CUSICK

President

4-19-00

(941) 463-8077

Date

Daytime Phone #

CR2E034 (9/99)