## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

## Aug 16, 2000 8:00 am Secretary of State DOCUMENT # P94000088941 1. Entity Name SUREMATH PUBLISHING, INC. 08-16-2000 90004 043 \*\*\*150.00 Principal Place of Business Mailing Address 15500 FIDDLESTICKS BLVD. 15500 FIDDLESTICKS BLVD. FT. MYERS FL 33912-4037 FT. MYERS FL 33912 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0552421 Not Applicat \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MCALLISTER, SHARON Street Address (P.O. Box Number is Not Acceptable) 15500 FIDDLESTICKS BLVD. FT. MYERS FL 33912 Zip Code City Fl 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible -10.-Election Campaign Financing-\$5.00 May 6 After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. Delete Change TITLE MCALLISTER, SHARON NAME NAME 15500 FIDDLESTICKS BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT MYERS FL 33912 TITLE Change Addi: ☐ Defete TITLE MCALLISTER, HOWARD NAME NAME STREET ADDRESS 1737 BENT TREE CIR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33907 ☐ Addis ☐ Change ☐ Delete TITLE TITLE MCALLISTER, PAMELA NAME STREET ADDRESS 723 NW 105TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SEATTLE WA 98133 Change Addi TITLE ☐ Delete MCALLISTER, LOIS NAME STREET ADDRESS 1737 BENT TREE CIR. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT.MYERS FL 33907 Change Addi ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addi THILE NAME NAME STREET ADDRESS STREET ADDRESS C1TY-ST-7/2 CITY-ST-7IP 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 direction of the corporation or the receiver of frostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 changed, or on an attachment with an address, with all other like empowered.

FILED

July 15, 2000

Department of State Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

## Dear Sir:

Last week we received another packet to file our 2000 Uniform Business Report. I don't understand – we already filed this in mid-April.

Our accountant re-checked our bank statements and called the bank today for cleared checks since the last statement – apparently your Department hasn't deposited our check # 1102 dated April 19, 2000. We stopped payment on that check today.

Attached is a copy of my file copy of our 2000 Uniform Business Report and a replacement check for \$150.

I hope this clears up this matter. I will check with our bank for the clearing of this check, #1114, on a daily basis to be sure everything has been received by your office.

Sincerely,

Sharon McAllister

President