

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000090063

1. Entity Name

J-C PIPELINE INC.



FILED

Sep 05, 2000 8:00 am
Secretary of State

09-05-2000 90025 015 ***550.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

6105 33RD STREET EAST
BRADENTON FL 34203
US

Mailing Address

3314 59 AVE DRIVE EAST
BRADENTON FL 34203

2. Principal Place of Business

3. Mailing Address

6105 33RD ST E

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

BRADENTON FL

4. FEI Number

59-0722115

Applied For

Not Applicable

Zip

Country

Zip

Country

34203

USA

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

MANESS, JUDITH E
3314 59 AVE DRIVE EAST
BRADENTON FL 34203

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	D	MANESS, JUDITH E	3314 59 AVE DRIVE EAST BRADENTON FL 34203	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	V	MANESS, ROY L	3314 59TH AVE DR E BRADENTON FL 34203	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	V	MANESS, RILEY J	5055 261ST ST E MYAKKA CITY FL 34521	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	V	MANESS, KIMBERLY R	1900 DARBY RD SARASOTA FL 34240	<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> 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

JUDITH E. MANESS PRESIDENT

Date

Daytime Phone #

8-30-00 (941) 758-2228

CR2E034 (5/00)