

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000011465

1. Entity Name

WILLIAM AND BRENDA CARTER, INC.

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90049 021 ***150.00

Principal Place of Business

Mailing Address

3835 ERIN BROOK DR.
NEW PORT RICHEY FL 34655

3835 ERIN BROOK DR.
NEW PORT RICHEY FL 34655

2. Principal Place of Business

3. Mailing Address

5250 Green Key Rd.
Suite, Apt. #, etc.

5250 Green Key Rd.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

New Port Richey

New Port Richey

Zip

Country

Zip

Country

34652

FL

34652

FL

4. FEI Number 59-3306308

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

CARTER, WILLIAM A
3835 ERIN BROOK DR.
NEW PORT RICHEY FL 34655

Name

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

5250 Green Key Rd.

City

New Port Richey

FL

Zip Code

34652

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, 2001 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
D
CARTER, WILLIAM A
3835 ERIN BROOK DR.
NEW PORT RICHEY FL 34655 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
5250 Green Key Rd
New Port Richey FL 34652 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CARTER, BRENDA J
3835 ERIN BROOK DR.
NEW PORT RICHEY FL 34655 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
5250 Green Key Rd
New Port Richey FL 34652 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/01

Date

727-847-4698

Daytime Phone #

CR2E034 (10/00)