

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000011683

1. Entity Name

MARLENE JOHNSON ACCOUNTING SERVICES, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90042 027 ***150.00

Principal Place of Business

Mailing Address

135 E. INTERNATIONAL SPEEDWAY BLVD.
 SUITE #7
 DAYTONA BEACH FL 32118

135 E. INTERNATIONAL SPEEDWAY BLVD.
 SUITE #7
 DAYTONA BEACH FL 32127-4456

2. Principal Place of Business

302 Dunlanton Ave.

Suite, Apt. #, etc.

3. Mailing Address

302 Dunlanton Ave.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Port Orange, FL

City & State

Port Orange, FL

4. FEI Number

59-3293345

Applied For

Not Applicable

Zip

32127

Country

Volusia

Zip

32127

Country

Volusia

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

JOHNSON, MARLENE
 135 E. INTERNATIONAL SPEEDWAY BLVD.
 SUITE #7
 DAYTONA BEACH FL 32118

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 ☐ Delete
 NAME D
 STREET ADDRESS JOHNSON, MARLENE
 CITY-ST-ZIP 135 E. INTERNATIONAL SPEEDWAY BLVD., STE 7
 DAYTONA BEACH FL 32118

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 302 Dunlanton Ave.
 CITY-ST-ZIP Port Orange, FL 32127

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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 CITY-ST-ZIP

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:

Marlene Johnson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00
 Date

Daytime Phone #

CR2E034 (9/99)