

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000014518

1. Entity Name

SAFEGUARD SERVICES SOUTHEAST, INC.

FILED
Jan 31, 2000 8:00 am
Secretary of State

01-31-2000 90101 040 ***150.00

Principal Place of Business

Mailing Address

452 SUGARGLEN RD
SKI VALLEY ACRES
WAITSFIELD VT 05673

452 SUGARGLEN RD
SKI VALLEY ACRES
WAITSFIELD VT 05673-7176

011011



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **03-0346588**

Applied For
Not Applicable

Zip

Country

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

F & L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202

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
STREET ADDRESS
CITY-ST-ZIP
DPT.
BRIGGS, JAMES R
RR 1 BOX 310 SKI VALLEY ACRES
WAITSFIELD VT 05673

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
New Address
452 Sugarglen Dr

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
BRIGGS, MARY L
RR 1 BOX 310 SKI VALLEY ACRES
WAITSFIELD VT 05673

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
452 Sugarglen Dr.

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRILL, DOROTHY ANN
48 TIMBER MILL ROAD
STANFORD CT 06903

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
ROFFEL, M. CAMERON
CANTERBURY SCHOOL, 167 ASPATUCK AVENUE
NEW MILFNO CT 06776

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
COACH, ELIZABETH V.
63 WESTCOTT DRIVE
STAMFORD CT 06902

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BRIGGS, JAMES P.
BLUE GOOSE CONDOM, UNIT B 291 2ND AVE.
KETCHUM ID 83340

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
22 Upham St.
West Newton, MA 02465

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:

James R. Briggs James R. Briggs
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/2000
Date

802-496-2094
Daytime Phone #