

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000039785

1. Entity Name
ELD, INC.

FILED
Mar 09, 2001 8:00 am
Secretary of State

03-09-2001 90471 016 ***150.00

Principal Place of Business
~~39987 EMERALD COAST PKWY~~
DESTIN FL 32541

Mailing Address
~~39987 EMERALD COAST PKWY~~
DESTIN FL 32541

2. Principal Place of Business
4507 FURLING

3. Mailing Address
P.O. Box 5708

Suite, Apt. #, etc.
Unit # 213

Suite, Apt. #, etc.

City & State
Destin, FL

City & State
Destin, FL

Zip
32541

Country
OKALOOSA

Zip
32540

Country
OKALOOSA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3322268

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

HALL, STEVE
36468 EMERALD COAST PKWY
BLDG II, SUITE 2201 OLD SOUTH CENTRE
DESTIN FL 32541

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, 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
DP
SHARPE, JAMES A
~~39987 EMERALD COAST PKWY~~
DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
Sharpe, James A.
165 Crest Drive
Destin, FL 32550 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
ANGNER, JOSEPH J
~~2598 MAPLE GROVE COVE~~
DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
Angner, Joseph J.
151 Crest Drive
Destin, FL 32550 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
CHRISTIE, GERALD J
1348 EMERALD BAY DR
DESTIN FL 32541 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MCGILL, LARRY
2323 10 MAIN SUITE 217
DOTHAN AL 36302 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
CARR, SHANNON S
4465 KINGSLYNN ROAD
NICEVILLE FL 32578 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GIESEN, ANDREW E
588 MOONEY RD
FT WALTON BEACH FL 32547 ☐ 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

3/7/01 850-654-4550

Date

Daytime Phone #

CR2E034 (10/00)