

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000046199

1. Entity Name

THE BLONDE IGUANA, INC.

**FILED**  
**Apr 16, 2001 8:00 am**  
**Secretary of State**

04-16-2001 90034 013 \*\*\*150.00

Principal Place of Business

322 W PARK AVE  
TALLAHASSEE FL 32301

Mailing Address

P.O. BOX 4217  
TALLAHASSEE FL 32315

2. Principal Place of Business

3. Mailing Address

322 W. Park Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tallahassee, Florida

Zip

Country

Zip  
32301

Country

USA

4. FEI Number

59-3324666

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CLARK, LEONARD  
322 W PARK AVE  
TALLAHASSEE FL 32301

7. Name and Address of New Registered Agent

Name Beth Revell

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

1740 Silverwood dr.

City Tallahassee

FL

Zip Code  
32301

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 Beth Revell Beth Revell, President 4-9-01  
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

TITLE PVST ☒ Delete  
NAME CLARK, LEONARD  
STREET ADDRESS 322 W PARK AVE  
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ST ☐ Delete  
NAME TULLY, CYNTHIA  
STREET ADDRESS 322 W PARK AVE  
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV ☒ Change ☐ Addition  
NAME Revell, Beth  
STREET ADDRESS 1740 Silverwood dr.  
CITY-ST-ZIP Tallahassee, Fl. 32301

TITLE ST ☐ Change ☐ Addition  
NAME Tully, Cynthia  
STREET ADDRESS 322 W. Park Ave.  
CITY-ST-ZIP Tallahassee, Fl. 32301

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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: Beth Revell Beth Revell, President 4-9-01 850-224-1500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0461153

CR2E034 (10/00)