

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90096 016 ***150.00

DOCUMENT # P95000053778

1. Entity Name
GRANNY'S APPLES, INC.

Principal Place of Business
215 WOOD STREET
PUNTA GORDA FL 33950

Mailing Address
215 WOOD STREET
PUNTA GORDA FL 33950

2. Principal Place of Business
403 Sullivan
 Suite, Apt. #, etc.
B

3. Mailing Address
403 Sullivan
 Suite, Apt. #, etc.
B

City & State
Punta Gorda, FL
 Zip
33950 Country
USA

City & State
Punta Gorda FL
 Zip
33950 Country
USA

4. FEI Number **65-0595899**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

SIMONI, ELLEN M
2510 BRAZILIA COURT
PUNTA GORDA FL 33950-6302

7. Name and Address of New Registered Agent

Name

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

403-A Sullivan St.

City

Punta Gorda

FL

Zip Code

33950

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 *Ellen M. Simoni* **Ellen M. Simoni**

05-01-01

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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PVPD	SIMONI, ELLEN M	2510 BRAZILIA COURT	PUNTA GORDA FL	<input type="checkbox"/>
SD	DEMASSE, DEBORAH	13270 COUNTRY RIDGE DR	GERMANTOWN MD 20874	<input type="checkbox"/>
TD	SIMONI, MARTIN P	3758 CHERRY LANE	STEWARTSTOWN PA 17363	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
		403-A Sullivan St		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		12 valley side Ct	German town, MD 20874	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Ellen M. Simoni* **Ellen M. Simoni** **05-01-01** **505-9003**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)