

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000068025

1. Entity Name

FAME PERFORMING ARTS CENTER, INC.

FILED
May 05, 2000 8:00 am
Secretary of State

05-05-2000 90111 020 ***150.00

Principal Place of Business

16531 MCGREGOR BLVD
FT MYERS FL 33908

Mailing Address

16531 MCGREGOR BLVD
FT MYERS FL 33908-2567

2. Principal Place of Business

15660 San Carlos Blvd

3. Mailing Address

15660 San Carlos Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

31

31

City & State

Ft. Myers, FL

City & State

Ft. Myers, FL

Zip

Country

33908

USA

Zip

Country

33908

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0602947

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STOCKER, VANESSA
16531 MCGREGOR BLVD
FT MYERS FL 33908

7. Name and Address of New Registered Agent

Name

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

15660 San Carlos Blvd
#31

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

TITLE ☐ Delete
NAME D STOCKER, VANESSA
STREET ADDRESS 16531 MCGREGOR BLVD
CITY-ST-ZIP FT MYERS FL 33908

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME D/D/S/H/C
STREET ADDRESS 15660 San Carlos Blvd #31
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
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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:

Vanessa Stocker
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/00
Date

406-7090
Daytime Phone #

CR2E034 (9/99)