

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000076712

1. Entity Name

BUG SMASHERS OF TAMPA BAY, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90848 014 ***150.00

Principal Place of Business

Mailing Address

29702 N. 68TH ST
CLEARWATER FL 33761-1613
US

29702 N. 68TH ST
CLEARWATER FL 33761-1613
US

2. Principal Place of Business

28051 US 19 N

Suite, Apt. #, etc.

SUITE G

City & State

CLEARWATER FL

Zip

33761 2647

Country

PINELLAS

3. Mailing Address

28051 US 19 N

Suite, Apt. #, etc.

SUITE G

City & State

CLEARWATER FL

Zip

33761 2647

Country

PINELLAS



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3337434

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOLEN, DAVID C
29702 N. 68TH ST
CLEARWATER FL 33761-1613

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CP
MADDOX, PATRICK E
29702 N. 68TH ST
CLEARWATER FL 33761-1613 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VST
BOLEN, DAVID C
29702 N. 68TH ST
CLEARWATER FL 33761-1613 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
28051 US 19 N SUITE G
CLEARWATER FL 33761 2647 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
28051 US 19 N SUITE G
CLEARWATER FL 33761 2647 ☐ Change ☐ Addition

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CITY-ST-ZIP
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☐ Change ☐ Addition

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:

DAVID C BOLEN

4/28/00

727 797 6921

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)