

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 21, 2001 8:00 am
Secretary of State

05-16-2001 90248 025 ***150.00

DOCUMENT # **095000080535**

1. Entity Name

**Wayne Frier Manufactured Home Center of
 Homosassa Springs, Inc.**

Principal Place of Business

Mailing Address

2. Principal Place of Business

14853. Sincost Blvd.

Suite, Apt. #, etc.

3. Mailing Address

12788 US 90 West

Suite, Apt. #, etc.

City & State

Homosassa, FL

Zip

34448

Country

USA

City & State

Live Oak, FL

Zip

32060

Country

US

4. FEI Number

63-0625141

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**Haley, William J.
 10 North Columbia St.
 Lake City, FL 32055**

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, 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

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

☐ Delete

TITLE
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TITLE
 NAME
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 CITY - ST - ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**DIPS
 Frier, Matthew Wayne
 12788 US 90 West
 Live Oak, FL 32060**

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**DIV
 Frier, Wayne
 12788 US 90 West
 Live Oak, FL 32060**

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

**DIT
 Frier, Todd Daniel
 12788 US 90 West
 Live Oak, FL 32060**

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
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☐ Change ☐ Addition

TITLE
 NAME
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 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:

Todd Frier Todd Frier

6/14/01

Date

386-362-2720

Daytime Phone #

CR2E034 (11/00)