

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000084262

1. Entity Name

COUNTRY ROAD BUFFET, INC.

FILED

Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90123 002 ***150.00

Principal Place of Business

Mailing Address

4325 WOODBINE ROAD
PACE FL 32571
US

4325 WOODBINE ROAD
PACE FL 32571-8704
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3347203

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WILLIAMS, ROBERT O

~~4475 WOODBINE ROAD, SUITE 8~~ 3342 Williamswood Dr
PACE FL 32571

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete

NAME WILLIAMS, ROBERT O
STREET ADDRESS ~~4475 WOODBINE ROAD, SUITE 8~~ 3342 Williamswood Dr.
CITY-ST-ZIP PACE FL 32571

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME CARTER, PATRICK MICHAEL
STREET ADDRESS 5551 OAKMONT DRIVE
CITY-ST-ZIP PACE FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

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TITLE ☐ Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

SIGNATURE: Bob Williams Bob WILLIAMS 1/30/00 850 995 4580
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)