

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000090547

1. Entity Name

BOBCAT OF CENTRAL FLORIDA, INC.

FILED
Sep 08, 2000 8:00 am
Secretary of State

09-08-2000 90019 001 *1,676.25

Principal Place of Business

Mailing Address

9802 PALM RIVER RD
 TAMPA FL 33619
 US

9802 PALM RIVER RD
 TAMPA FL 33619-4438
 US

2. Principal Place of Business

3. Mailing Address

7410 East Colonial Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando FL

Zip

Country

32807

Country

USA

4. FEI Number

65-0624763

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

7. Name and Address of New Registered Agent

KINGSLAND, RICHARD G
 4131 ALDERGATE PLACE
 ORLANDO FL 32708

Name Richard A. Kingsland

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

7410 East Colonial Drive

City Orlando

FL

Zip Code 32807

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

Richard A. Kingsland

Richard A. Kingsland, President

9-5-00

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 NAME STREET ADDRESS CITY-ST-ZIP	C KINGSLANDS, RICHARD G 4131 ADLERGATE WINTER SPRINGS FL 32708	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KINGSLAND, RICHARD A 889 WILLOW RUN LANE WINTER SPRINGS FL 32708	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP HALL, RICHARD A 4205 S HEATHCOE RD PLANT CITY FL 33567	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Richard A. Kingsland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A. Kingsland, President

Date

Daytime Phone #

407-273-7383

CR2E034 (9/99)