

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000008824 6690-1/S.B.

1. Entity Name

BKB, INC.

Principal Place of Business

% BAY PLAZA EXECUTIVE CENTER
1290 PALM AVENUE
SARASOTA FL 34236

Mailing Address

% BAY PLAZA EXECUTIVE CENTER
1290 PALM AVENUE
SARASOTA FL 34236-5604

2. Principal Place of Business

240 S. Pineapple Avenue

3. Mailing Address

P.O. Box 49948

Suite, Apt. #, etc.

10th Floor

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, Florida

4. FEI Number

65-0662821

Applied For

Not Applicable

Zip

34236

Country

USA

Zip

34230-6948

Country

USA

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

KAUFFMAN, MARK S
% BAY PLAZA EXECUTIVE CENTER
1290 PALM AVENUE
SARASOTA FL 34236

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 D
STREET ADDRESS BAND, DAVID S
CITY-ST-ZIP % 240 S. PINEAPPLE AVENUE
SARASOTA FL 34236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS BAND, MYRNA L
CITY-ST-ZIP % 240 S. PINEAPPLE AVENUE
SARASOTA FL 34236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS KAUFMAN, MARK S
CITY-ST-ZIP 455 LONGBOAT KEY ROAD, PH #4
LONGBOAT KEY FL 34228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS KAUFMAN, IRENE E
CITY-ST-ZIP 455 LONGBOAT KEY ROAD, PH #4
LONGBOAT KEY FL 34228

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS BRODSKY, RANDALL I
CITY-ST-ZIP 3662 COUNTRY PLACE BLVD.
SARASOTA FL 34233

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME D
STREET ADDRESS BRODSKY, RANDI L
CITY-ST-ZIP 3662 COUNTRY PLACE BLVD.
SARASOTA FL 34233

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:

David S. Band
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David S. Band
Director

4/19/00

(941) 366-6660

Date

Daytime Phone #

CR2E 03-14 (03/99)

FILED
May 03, 2000 8:00 am
Secretary of State

05-03-2000 90117 022 ***150.00



DO NOT WRITE IN THIS SPACE