2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000009593

1. Entity Name

ENDUROTECH OF NORTHWEST FLORIDA, INC.



Secretary of State 07-14-2000 90004 037 ***150.00

AU867764

FILED

Jul 14, 2000 8:00 am

Principal Place of Business

Mailing Address

3056 GULF BREEZE PKWY GULF BREEZE FL 32561 3056 GULF BREEZE PKWY GULF BREEZE FL 32561

2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3361207 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BAUGHN, TIM Street Address (P.O. Box Number is Not Acceptable) 3056 GULF BREEZE PKWY **GULF BREEZE FL 32561** 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change Delete TIT! F BAUGHN, TIMOTHY NAME STREET ADDRESS 3888 CAPTAINS CT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF **GULF BREEZE FL 32561** TITLE Change ☐ Addition ☐ Delete BAUGHN, ANTHONY L NAME NAME 804 PANFERIO DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32561 ☐ Change Addition TITI F ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME

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 director of the risk empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MATILITY AND THE OR PRINTED HAVE OF SIGNING OFFICER OR DIRECTO

7/5/2000

850.932.4472

Daytime Phone #

CR2 (2034 (5/00)

ENDUROTECH

Of Northwest Florida

AWNINGS & STORM PROTECTION

July 5, 2000

Division of Corporations P.O. Box 6327 Tallahassee, FL. 32314

To Whom It May Concern:

I am enclosing my 2000 Uniform Business Report, along with a check in the amount of \$150.00. I spoke with a gentleman named Tyrone with your office, and he informed me that I should follow these procedures in my effort to have the late fee of \$400.00 waived. My office never received my initial report form, so I failed to meet the May deadline. I always pay on a timely basis, due to the excessive late fee, and I would certainly have payed promptly this year, had I received the form. Please honor my request and accept my payment for the above stated form. I apologize, in advance, for any inconvenience this may cause.

Sincerely,

Timothy S. Baughn

President

Endurotech of Northwest Florida, Inc.