

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000016924

1. Entity Name

FORCE HOLDINGS, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -3 PM 1:31

Principal Place of Business
600 E. Colonial Drive
Suite 200
Orlando, Florida 32803

Mailing Address
~~600 E. Colonial Drive~~
~~Suite 200~~
~~Orlando, Florida 32803~~

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
215 North Eola Drive
Suite, Apt. #, etc.

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

City & State
Orlando, Florida

City & State
Orlando, Florida


4. FEI Number
65-0646030

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
H. Gregory McNeill
215 North Eola Drive
Orlando, Florida 32801

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  DATE 10/26/00

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 P	Perkins, Jerry E. 600 E. Colonial Drive Suite 200 Orlando, Florida 32803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400003473274--9 -11/21/00--01101--0075 ****750.00
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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:  DATE 10/26/00 (407) 650-9400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Jerry E. Perkins, President

CR2E034 (9/99)