

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000046081

1. Entity Name
AGRI-STARTS MICROS, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90073 022 ***150.00

Principal Place of Business

1728 KELLY PARK RD
APOPKA FL 32712
US

Mailing Address

1728 KELLY PARK RD.
APOPKA FL 32712

2. Principal Place of Business

3941 BRITT ROAD

3. Mailing Address

3941 BRITT ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MT. DORA, FL

City & State

MT. DORA, FL

Zip

32757

Country

Zip

32757

Country

4. FEI Number 59-3388120

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

ABNER, GERALDINE
274 BANNING BEACH RD.
TAVARES FL 32778

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, 2001 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 DP
STREET ADDRESS ABNER GERALDINE
CITY-ST-ZIP 1728 KELLY PARK RD
APOPKA FL

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

TITLE ☐ Delete
NAME DST
STREET ADDRESS J BRUCE CARPENTER
CITY-ST-ZIP 1728 KELLY PARK RD
APOPKA FL

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

TITLE ☐ Delete
NAME D
STREET ADDRESS THOMAS LEE GOODE
CITY-ST-ZIP 1728 KELLY PARK RD
APOPKA FL

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MICHAEL RINCK
CITY-ST-ZIP 1728 KELLY PARK RD
APOPKA FL

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

TITLE ☐ Delete
NAME D
STREET ADDRESS RANDALL STRODE
CITY-ST-ZIP 1728 KELLY PARK RD
APOPKA FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Geraldine Abner GERALDINE ABNER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-01
Date

(407) 889-9055
Daytime Phone #

CR2E034 (10/00)