## 2001 UNIFORM BUSINÈSS REPORT (UBR)

## Apr 10, 2001 8:00 am Secretary of State DOCUMENT # **P96000051309** 1. Entity Name GREAT SOUTHERN TRADING CO. 04-10-2001 90082 027 \*\*\*150.00 Mailing Address Principal Place of Business 2517 BEGONIA DRIVE 2517 BEGONIA DRIVE MIDDLEBURG FL 32068 MIDDLEBURG FL 32068 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3388835 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HANBY, MARY S Street Address (P.O. Box Number is Not Acceptable) 2517 BEGONIA DRIVE MIDDLEBURG FL 32068 Zip Code City FL 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. Addition Change TITLE Delete TITLE NAME HANBY, MARY S NAME STREET ADDRESS STREET ADDRESS 2517 BEGONIA DRIVE CITY-ST-ZIP CITY-ST-ZIP MIDDLEBURG FL 32068 Addition TITLE Change □ Delete TITLE HAIMOWITZ, MARK J NAME NAME STREET ADDRESS STREET ADDRESS 2517 BEGONIA DRIVE CITY-ST-7IP CITY-ST-ZIP MIDDLEBURG FL 32068 Change ☐ Addition ST TITLE ☐ Delete TITLE HANBY. DAVID R NAME NAME STREET ADDRESS STREET ADDRESS 2517 BEGONIA DRIVE CITY-ST-ZIP CITY-ST-ZIP MIDDLEBURG FL 32068 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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

h all other like empo

changed, or on an attach

SIGNATURE: