

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000051853

1. Entity Name

MIKE FOXTROT CORPORATION

FILED
Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90068 020 ***150.00

Principal Place of Business

Mailing Address

13625 LAMIRADA CIRCLE
WEST PALM BEACH FL 33414

13625 LAMIRADA CIRCLE
WEST PALM BEACH FL 33414

2. Principal Place of Business

2020 GREENBRIAR BLVD.

3. Mailing Address

2020 GREENBRIAR BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WELLINGTON, FL

City & State

WELLINGTON, FL

Zip

33414

Country

US

Zip

33414

Country

US

4. FEI Number

65-0680247

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

FERRIN, MICHAEL J
1400 CENTREPARK BLVD.
SUITE 909
WEST PALM BEACH FL

Name MICHAEL J. FERRIN

Street Address (P.O. Box Number is Not Acceptable)

823 NORTH OLIVE AVE

City WEST PALM BEACH

FL

Zip Code

33401

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 PT
NAME FERRIN, MICHAEL J
STREET ADDRESS 13625 LAMIRADA CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2020 GREENBRIAR BLVD
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE VPS
NAME FERRIN, MARGARET A
STREET ADDRESS 13625 LAMIRADA CIRCLE
CITY-ST-ZIP WEST PALM BEACH FL ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 2020 GREENBRIAR BLVD.
CITY-ST-ZIP WELLINGTON, FL 33414

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

SIGNATURE REQUIRED MICHAEL J. FERRIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(561) 793-0244

CR2E034 (9/99)