

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000054355

1. Entity Name

MINCY GULF PROPERTIES, INC.

FILED
Jan 25, 2001 8:00 am
Secretary of State

01-25-2001 90120 040 ***150.00

Principal Place of Business
401A SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

Mailing Address
401A SOUTH INDIAN RIVER DRIVE
FORT PIERCE FL 34950

008261



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
P.O. Box 261

3. Mailing Address
P.O. Box 261

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Perry, FL

City & State
Perry, FL

4. FEI Number 59-3389125

Applied For

Not Applicable

Zip
32348

Country
USA

Zip
32348

Country
USA

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

MINCY, JIMMY R
310 BISHOP BLVD.
PERRY FL 32347

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 *Jimmy R. Mincy*

Jimmy Mincy, President

January 17, 2001

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
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MINCY, JIMMY
310 BISHOP BLVD
PERRY FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: *Jimmy R. Mincy*

Jimmy R. Mincy, President

01/17/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)