

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000058720

1. Entity Name
LAREDO & LEFTY FOODS, INC.

FILED
Aug 28, 2000 8:00 am
Secretary of State

08-28-2000 90036 029 ***550.00

Principal Place of Business

4615 SWINDELL RD
LAKELAND FL 33810
US

Mailing Address

1155 PARKSIDE TRAIL
EVANS GA 30809
US

2. Principal Place of Business

100 N. Tampa Street

3. Mailing Address

Suite, Apt. #, etc.

Suite 2830

City & State

Tampa, FL

Zip

33602

Country

US

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3391758

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

F & L CORP.
THE GREENLEAF BUILDING
200 LAURA STREET
JACKSONVILLE FL 32202-3527

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

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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

TITLE PSD
NAME GARNER, DAVID E
STREET ADDRESS 15310 AMBERLY DRIVE, SUITE 250
CITY-ST-ZIP TAMPA FL 33647 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSC
NAME John Sykes
STREET ADDRESS 100 North Tampa Street, Suite 2830
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

TITLE m
NAME Tripp Nanney
STREET ADDRESS 100 North Tampa Street, Suite 2830
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

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

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

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

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:

Tripp Nanney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/23/00
Date

706-854-0337
Daytime Phone #

CR2E034 (5/00)