

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P960000067090**

1. Entity Name

Orlando Executive Wholesale, Inc. B

Principal Place of Business

**1390 West North Blvd
Leesburg, FL 34748**

Mailing Address

**P.O. Box 120355
Clermont, FL 34712**

2. Principal Place of Business

1390 West North Blvd
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 120355
Suite, Apt. #, etc.

City & State

Leesburg Florida
Zip **34748** Country **USA**

City & State

Clermont, Florida
Zip **34712** Country **USA**

4. FEI Number

59-3396588

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

Richard H. Langley
700 Almond St.
Clermont, FL 34711

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

Richard H. Langley
Signature, typed or printed name of registered agent and type if applicable.

Richard H. Langley
(NOTE: Registered Agent signature required when reappointing)

8/9/00
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

TITLE **President** ☐ Delete
NAME **Richard H. Langley**
STREET ADDRESS **700 Almond St**
CITY-ST-ZIP **Clermont, FL 34711**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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:

Richard H. Langley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/09/00 **(907) 9476037**
Date Daytime Phone #

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

08-15-2000 90015 008 ***158.75

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DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)