

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000070758

1. Entity Name

JOHN LUMSDEN, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 JAN -3 PM 1:19

Principal Place of Business

~~11786 TIMBERS WAY~~
BOCA RATON FL ~~33428~~ 33498
18027 Clear Brook Circle

Mailing Address

~~11786 TIMBERS WAY~~
BOCA RATON FL ~~33428~~ 33498
18027 Clear Brook Circle

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT DO NOT WRITE IN THIS SPACE

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4. FEI Number 65-0497211

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

LUMSDEN, JOHN
11786 TIMBERS WAY 18027 Clear Brook Circle
BOCA RATON FL ~~33428~~ 33498

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

John Lumsden John Lumsden

12-27-00

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS LUMSDEN, JOHN 18027 Clear Brook Cir
CITY-ST-ZIP ~~11786 TIMBERS WAY~~ BOCA RATON FL ~~33428~~ 33498

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

TITLE ☐ Delete
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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:

John Lumsden John Lumsden

12-27-00

561-715-7400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #