

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000076746

1. Entity Name

THE WRIGHT GRADE, INC.

**FILED**  
**Apr 21, 2000 8:00 am**  
**Secretary of State**

04-21-2000 90149 030 \*\*\*150.00

Principal Place of Business

Mailing Address

983 GENESEE AVENUE  
SEBASTIAN FL 32958

983 GENESEE AVENUE  
SEBASTIAN FL 32958-8036

2. Principal Place of Business

6255 Cherry Lane  
Suite, Apt. #, etc.

3. Mailing Address

6255 Cherry Lane  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

VENU BENCH FL.

City & State

VENU BENCH FL.

4. FEI Number

65-0697799

Applied For

Not Applicable

Zip

32966

Country

INDIAN RIVER

Zip

32966

Country

INDIAN RIVER

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRODERICK, ELISA B  
983 GENESEE AVENUE  
SEBASTIAN FL 32958

7. Name and Address of New Registered Agent

Name

LEO W. WRIGHT

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

6255 CHERRY LANE

City

VENU BENCH, FL.

FL

Zip Code

32966

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

*Leo W. Wright*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-14-00

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 PTD ☐ Delete  
NAME BRODERICK, ELISA B  
STREET ADDRESS 983 GENESEE AVE  
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE SVD ☐ Delete  
NAME WRIGHT, LEO W  
STREET ADDRESS 983 GENESEE AVE  
CITY-ST-ZIP SEBASTIAN FL 32958

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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 LEO W. WRIGHT ☒ Change ☐ Addition  
NAME ☒ Change ☐ Addition  
STREET ADDRESS 6255 CHERRY LANE  
CITY-ST-ZIP VENU BENCH, FL. 32966

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

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

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

TITLE ☐ Change ☐ Addition  
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: *Elisa Broderick* Broderick, Pres. 4-14-00 (66) 388-2675  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)