

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000080610

1. Entity Name

EAGLE PRINTING OF LARGO, INC.

FILED
May 22, 2000 8:00 am
Secretary of State

05-22-2000 90039 036 ***150.00

Principal Place of Business

1260 W. BAY DRIVE. #A
LARGO FL 34640

Mailing Address

1497 MAIN ST
SUITE 141
DUNEDIN FL 34698-4612
US

2. Principal Place of Business

1408 Wilson Rd

3. Mailing Address

Suite, Apt. #, etc.

City & State

Clearwater FL

City & State

Zip

33755

Country

USA

Country

4. FEI Number

59-3395050

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

MCCLELLAN, DAN
1497 MAIN ST,
SUITE 141
DUNEDIN FL 34698

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 \$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
NAME
STREET ADDRESS
CITY-ST-ZIP

D
MCCLELLAN, DAN
1497 MAIN ST, SUITE 141
DUNEDIN FL 34698

☐ Delete

TITLE
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dan McClellan

Date

4-28-2000

Daytime Phone #

727 442 8170

CR2E034 (9/99)