

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000083757

1. Entity Name

RIATA COACH, INC.

Principal Place of Business

498 CARVER ROAD
ROCKLEDGE FL 32955

Mailing Address

498 CARVER ROAD
ROCKLEDGE FL 32955-5509

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3406473

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

HOUSTON, COYTE E

498 CARVER ROAD

ROCKLEDGE FL 32955

875 Whispering Pine Tr

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME HOUSTON, COYTE
STREET ADDRESS 498 CARVER ROAD
CITY-ST-ZIP ROCKLEDGE FL 32955

☐ Delete

TITLE ST
NAME HOUSTON, MARY
STREET ADDRESS 498 CARVER RD
CITY-ST-ZIP ROCKLEDGE FL

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/2000

828-396-2858

Date

Daytime Phone #

FILED

00 SEP 18 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

0121440

CR2E034 (9/99)

RE Rosta Coach Inc.
P 960000 83757 - 59-3406473

Sept, 11th 2000

D McRae

To whom it may concern

Rosta Coach Inc, is
operating in Hickory NC with a permit.
I called Tallahassee last year to inform
the Dept of State, that I wanted all correspondence
sent to NC. I was on the phone w/ several
people + by the time I hung up (approx 30 minutes)
I thought everything was understood all mail
would be sent to N.C. I have been sick this
year, and have been unable to make the
trip to Fla, very often. I was supposed
to go in April, But did not get there until
August. So I never got my mail, Please
make sure next year the mail comes directly
to us in NC.

Coyte or Mary Houston
4084 Hwy 10 East
Claremont NC 28610

828 - 241 - 2473 - home
828 - 396 - 2858 - work