

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000087041

1. Entity Name

FLANAGAN'S OF CLEARWATER, INC.

FILED

Mar 20, 2000 8:00 am  
Secretary of State

03-20-2000 90202 012 \*\*\*150.00

Principal Place of Business

Mailing Address

127 FOREST LAKES BLVD.

127 FOREST LAKES BLVD.

#6

#6

OLDSMAR FL 34677

OLDSMAR FL 34677-3029

US

US

2. Principal Place of Business

3. Mailing Address

1225 Kass Circle

1225 Kass Circle

Suite, Apt., etc.

Suite, Apt., etc.

City & State

City & State

Spring Hill FL

SPRING HILL FL

Zip

Country

Zip

Country

34606

Hernando

34606

HERNANDO

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FLANAGAN, MARGARET  
2569 COUNTRYSIDE BLVD  
17  
CLEARWATER FL 33761

Name

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

1225 Kass Circle

SPRING HILL

City

FL

Zip Code

34606

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

M E Flanagan

J. President

3/14/00

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 P  
NAME FLANAGAN, PATRICK M  
STREET ADDRESS 127 FOREST LAKE BLVD., #6  
CITY-ST-ZIP OLDSMAR FL 34677 ☐ Delete

TITLE FLANAGAN, PATRICK, M  
NAME PRESIDENT  
STREET ADDRESS 1225 KASS CIRCLE  
CITY-ST-ZIP SPRING HILL FL 34606 ☒ Change ☐ Addition

TITLE VSTD  
NAME FLANAGAN, MARGARET E  
STREET ADDRESS 127 FOREST LAKE BLVD., 36  
CITY-ST-ZIP OLDSMAR FL 34677 ☐ Delete

TITLE VICE, S, TD  
NAME FLANAGAN MARGARET E  
STREET ADDRESS 1225 KASS CIRCLE  
CITY-ST-ZIP SPRING HILL FL 34606 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
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CITY-ST-ZIP ☐ Delete

TITLE  
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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:

M E Flanagan J. Pres

3/14/00

352 686  
2808

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)