

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000087544

1. Entity Name

M.L. FORTUNE CO.

Principal Place of Business

3311 GUILFORD RD  
NAPLES FL 34112

Mailing Address

3311 GUILFORD RD  
NAPLES FL 34104-1301

2. Principal Place of Business

505 Windsor Sq.  
Suite, Apt. #, etc.  
#102  
City & State  
Naples FL  
Zip  
34104  
Country  
Collier

3. Mailing Address

505 Windsor Sq.  
Suite, Apt. #, etc.  
#102  
City & State  
Naples, FL  
Zip  
34104  
Country  
Collier



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0704581

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FORTUNE, MATTIE L  
3311 GUILFORD RD  
NAPLES FL 34112

7. Name and Address of New Registered Agent

Name  
Fortune, Mattie L  
Street Address (P.O. Box Number is Not Acceptable)  
505 Windsor Sq #102  
City  
Naples FL Zip Code  
34104

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 MATTIE L. FORTUNE Mattie L Fortune 2/7/00  
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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
FORTUNE, MATTIE L.  
3311 GUILFORD RD  
NAPLES FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
FORTUNE, Mattie L.  
505 Windsor Sq #102  
Naples, FL 34104 ☒ Change ☐ Addition

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

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

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☐ Change ☐ Addition

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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: Mattie L Fortune  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/99)