

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
 05-02-2001 90118 028 ***150.00

DOCUMENT # P96000100593

1. Entity Name
ACTIVITIES AROUND TOWNE INC.

Principal Place of Business
**5162 DIIRHURST CRESCENT CIRCLE
 BOCA RATON FL 33486**

Mailing Address
**5162 DIIRHURST CRESCENT CIRCLE
 BOCA RATON FL 33486**

2. Principal Place of Business
1061 SW 20th Street
 Suite, Apt. #, etc.

3. Mailing Address
1061 SW 20th Street
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Boca Raton Florida
 Zip **33486** Country

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4. FEI Number **65-0753146** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**REESE, TONYA
 5162 DIIRHURST CRESCENT CIRCLE
 BOCA RATON FL 33486**

7. Name and Address of New Registered Agent

Name **TONYA Smith**
 Street Address (P.O. Box Number is Not Acceptable)
1061 SW 20th Street
 City **Boca Raton** **FL** Zip Code **33486**

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 *Tonya Smith* (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, 2001 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	P SMITH, TONYA 5776 C. FOX HOLLOW DRIVE BOCA RATON FL 33486	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Tonya Smith 1061 SW 20th Street Boca Raton Florida 33486	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Tonya Smith* **Tonya Smith** 4-22-01 561-750-9165
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)