

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000101353

1. Entity Name

ARLYN ENTERPRISES, INC.

FILED

Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90040 042 ***150.00

Principal Place of Business

Mailing Address

1844 GOLDENROD ST
SARASOTA FL 34239
US

P O BOX 5786
~~STE 100~~
SARASOTA FL 34239-2206
US

910939

2. Principal Place of Business

1809 Loma Linda St.

3. Mailing Address

P.O. Box 5786

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

65-0714548

Applied For

Not Applicable

Zip
34239

Country

Sarasota

Zip

34277

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WISENER, JR., GARY L
1844 GOLDENROD ST.
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name

Gary L. Wisener, Jr.

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

1809 Loma Linda St.

City

Sarasota

FL

Zip Code
34239

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 (applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/2000

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 PSTD
NAME WISENER, JANET T
STREET ADDRESS 1844 GOLDENROD ST
CITY-ST-ZIP SARASOTA FL 34239 ☐ Delete

TITLE VD
NAME WISENER, GARY L
STREET ADDRESS 1844 GOLDENROD ST
CITY-ST-ZIP SARASOTA FL 34239 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
NAME WISENER, JANET T.
STREET ADDRESS 1809 Loma Linda St.
CITY-ST-ZIP Sarasota, FL 34239 ☐ Change ☐ Addition

TITLE VD
NAME WISENER, JR., GARY L.
STREET ADDRESS 1809 Loma Linda St.
CITY-ST-ZIP Sarasota, FL 34239 ☒ Change ☐ Addition

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

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

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

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: *[Signature]*

Gary L. Wisener, Jr.

1/11/2000

(941)366-33

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice President

Date

Daytime Phone #