

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000102351

1. Entity Name

ZICHECK PROPERTIES OF FLORIDA, INC.

Principal Place of Business

5570 SOUTH KENANSVILLE
YEEHAW JUNCTION FL 34972

Mailing Address

5570 SOUTH KENANSVILLE
YEEHAW JUNCTION FL 34972

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

FENNELL, TODD W
979 BEACHLAND BLVD
VERO BEACH FL 32963

7. Name and Address of New Registered Agent

Name Beverly Zichak
Street Address (P.O. Box Number is Not Acceptable)
5570 So Kenansville Rd
Yeehaw Junction FL
City FL Zip Code 34972

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, 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	D	<input type="checkbox"/> Delete
NAME	ZICHECK, STEPHANIE A	
STREET ADDRESS	5570 SOUTH KENANSVILLE	
CITY - ST - ZIP	YEEHAW JUNCTION FL 34972	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZICHECK, BEVERLY	
STREET ADDRESS	5570 SOUTH KENANSVILLE	
CITY - ST - ZIP	YEEHAW JUNCTION FL 34972	
TITLE	D	<input type="checkbox"/> Delete
NAME	ZICHECK, KENNETH G	
STREET ADDRESS	1804 LIDO DRIVE	
CITY - ST - ZIP	BRANDON FL 33511	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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

3/24/01

Daytime Phone #

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90002 027 ***300.00

937124



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0723315
Applied For ☐ Not Applicable ☐

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

0562816

CR2E034 (10/00)