

# 2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P96000104315

1. Entity Name

NORTH PINELLAS INVESTMENTS CORP.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JUL 18 PM 1:28

Principal Place of Business

Mailing Address

1917 CHESAPEAKE COURT  
OLDSMAR FL 34677

1917 CHESAPEAKE COURT  
OLDSMAR FL 34677-2615



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3440644

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BOWDEN, JEFFREY L  
1917 CHESAPEAKE COURT  
OLDSMAR FL 34677

Name

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

City

FL

Zip Code

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, 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
BOWDEN, JEFFREY L  
1917 CHESAPEAKE COURT  
OLDSMAR FL 34677 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
500003342775-3

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
BOWDEN, ROBIN L  
1917 CHESAPEAKE COURT  
OLDSMAR FL 34677 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
-08/01/00--01094-0013 ☐ Addition  
\*\*\*\*150.00 \*\*\*\*150.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
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CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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CITY-ST-ZIP  
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☐ 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 the empowered.

SIGNATURE: X

*[Signature]*

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 1-13-00

X (813) 855-8564

Date

Daytime Phone #

2052

North Pinellas Investments Corporation  
P.O.Box 691  
Oldsmar, Florida 34677


DATE: July 10, 2000

TO: Florida Department of State  
Division of Corporations

To whom it may concern,

In January 2000 we had filed a UBR form for North Pinellas Investments Corp., We have recently received a second notice for this Corporation, Per our conversation on July 10, 2000, with your Reinstatement Department, We have been instructed to resubmit this attached UBR form with \$150.00 filing fee.

Thank you in advance for your prompt attention to this matter.

A handwritten signature in black ink, appearing to be a stylized name, possibly "J. B. Smith" or similar, with a long horizontal stroke extending to the right.