

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91612 050 ***150.00

DOCUMENT # **P97000000104** ✓

1. Entity Name

LAURENWOOD CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

712 W. Jefferson St.

Suite, Apt. #, etc.

3. Mailing Address

1100 Pinellas Bayway

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Brooksville, FL

City & State

Tierra Verde, FL

4. FEI Number

59-3419745

Applied For

Not Applicable

Zip

34601

Country

Hernando

Zip

33715

Country

Pinellas

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jerry T. Ratledge

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

1100 Pinellas Bayway

H-1

City

Tierra Verde

FL

Zip Code

33715

**DO NOT WRITE
IN THIS SPACE**

6. 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 not applicable.

Jerry T. Ratledge

(NOTE: Registered Agent signature required when reinstating)

4/17/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

DPST

Jerry T. Ratledge

1100 Pinellas Bayway

Tierra Verde, FL 33715

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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TITLE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jerry T. Ratledge

4/17/02

Date

727-867-9116

Daytime Phone #

CR2E034B (12/01)