

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000000513

1. Entry Name

ANDERSON MFG. & UPHOLSTERY, INC.

FILED

Jun 27, 2000 8:00 am
Secretary of State

05-24-2000 90083 007 ***150.00

Principal Place of Business

2459 CHENEY HWY
TITUSVILLE FL 32780

Mailing Address

2459 CHENEY HWY
TITUSVILLE FL 32780-6732

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

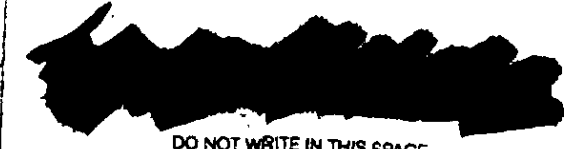
3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3453529

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

ANDERSON, DAVE
2469 WASHINGTON AVE
406C
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

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

TITLE: D
NAME: ANDERSON, BILLY D
STREET ADDRESS: 2469 WASHINGTON AVE 406C
CITY-ST-ZIP: TITUSVILLE FL 32780

☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition

STREET ADDRESS: ☐ Change ☐ Addition

CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition

STREET ADDRESS: ☐ Change ☐ Addition

CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition

NAME: ☐ Change ☐ Addition

STREET ADDRESS: ☐ Change ☐ Addition

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]

TENNIE McCreary (officemanager)

5/1/00 (321) 267-7028

BILLY DAVID ANDERSON

(President) 10/14/00 (321) 267-7028

CR2004 (9/99)