

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000007540

1. Entity Name

Brian Bateman, Inc.

FILED
May 30, 2000 8:00 am
Secretary of State

05-30-2000 90113 005 ***150.00

Principal Place of Business
2042 Orangeside Rd
Palm Harbor, FL 34683

Mailing Address
2042 Orangeside Rd
Palm Harbor, FL 34683

2. Principal Place of Business

3. Mailing Address

Suite Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3429864

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Bateman, Brian
2042 Orangeside Rd
Palm Harbor, FL 34683

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

FILE NOW!!! FEES \$150.00
After MAY 17, 2000 Fees will be \$350.00
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
NAME
STREET ADDRESS
CITY - ST - ZIP
D
Brian Bateman
2042 Orangeside Rd
Palm Harbor, FL 34683 ☐ Delete

TITLE
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CITY - ST - ZIP
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11:

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

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CITY - ST - ZIP
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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

DATE

Duration: Page #