## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 19, 2000 8:00 am Secretary of State DOCUMENT # P97000017451 SHARE THE WEALTH, INC. 01-19-2000 90262 012 \*\*\*150.00 Principal Place of Büsiness Mailing Address 706 N GREENWOOD AVE 706 N GREENWOOD AVE CLEARWATER FL 34615 CLEARWATER FL 33755-4209 604489 HS 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied Far City & State City & State 4. FEI Number 59-3429715 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HARRIS, CHARLIE Street Address (P.O. Box Number is Not Acceptable) 706 N GREENWOOD AVE **CLEARWATER FL 34615** Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change PCD ☐ Delete TITLE TITLE NAME HARRIS, CHARLIE NAME STREET ADDRESS STREET ADDRESS 1417 PINEBROOK DR CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33755** Delete ☐ Change ☐ Addition TITL F NAME NAME TAYLOR, HENRY E STREET ADDRESS STREET ADDRESS **4717 WOLFRAM LN** CITY-ST-7IP CITY-ST-ZIP **NEW PORT RICHEY FL 34653** D.Delete ---☐ Change ☐ Addition TITLE BRANDT, MARK W NAME NAME STREET ADDRESS STREET ADDRESS 13 EAGLE LN CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL 34683 TITLE ☐ Delete Change ☐ Addition NAME KELTNER, CARL H STREET ADDRESS STREET ADDRESS 961 MC LEAN ST CITY-ST-ZIP CITY-ST-ZIP **DUNEDIN FL 34698** TITLE ☐ Delete Change Addition NAME SANDS, DENETRIAS E STREET ADDRESS STREET ADDRESS 14935 55TH WAY N CITY-ST-ZIP CITY-ST-ZIP CLEARWATER FL 33720 ☐ Change Addition TITLE ☐ Delete TITLE KORB, HAROLD W NAME NAME STREET ADDRESS STREET ADDRESS 3187 SAN METRO ST

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 of 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 PRINTEDUMING OFFICER OR DIRECTOR

Date

Date

Description

Description

CITY-ST-7IP

CITY-ST-ZIP

**CLEARWATER FL 33759**