

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000019535

1. Entity Name
ZEBRA PUBLISHING COMPANY

FILED
Sep 19, 2000 8:00 am
Secretary of State

09-19-2000 90146 012 ***550.00

Principal Place of Business
1475 CASSON COURT
COLORADO SPRINGS CO 80919
US

Mailing Address
1475 CASSON COURT
COLORADO SPRINGS CO 80919
US

C0101170



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
14270 Timberedge Lane
Suite, Apt. #, etc.

3. Mailing Address
14270 Timberedge Lane
Suite, Apt. #, etc.

City & State
Colorado Springs, CO

City & State
Colorado Springs, CO

4. FEI Number 59-3504992

Applied For
Not Applicable

Zip Country
80921 US

Zip Country
80921 US

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

METZLER, MICHAEL K
2630 NW 41ST STREET
BLDG A
GAINESVILLE FL 32606

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 _____ (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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PSD
NAME KRENZ, BILL
STREET ADDRESS 1475 CASSON COURT
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE PSD ☒ Change ☐ Addition
NAME Krenz, Bill
STREET ADDRESS 14270 Timberedge Lane
CITY-ST-ZIP Colorado Springs, CO 80921

TITLE VTD
NAME KRENZ, SHERRY
STREET ADDRESS 1475 CASSON COURT
CITY-ST-ZIP GAINESVILLE FL 32608 ☐ Delete

TITLE VTD ☒ Change ☐ Addition
NAME Krenz, Sherry
STREET ADDRESS 14270 Timberede Lane
CITY-ST-ZIP Colorado Springs, CO 80921

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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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 like empowered.

SIGNATURE: *Sherry Krenz*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-10-00 (719) 495-7771
Date Daytime Phone # Ext. 12

CR2E034 (5/00)