2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000022431

1. Entity Name

MABILE & BULLARD ENTERPRISES INCORPORATED

Principal Place of Business

THE DIXIE BUILDING
U.S. HWY 90 EAST
LAKE CITY FL 32055

Mailing Address

POST OFFICE BOX 1432
LAKE CITY FL 32056-1432

C0040362

DO NOT WRITE IN THIS SPACE

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	59-3431126	Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BULLARD, CHRIS A
U.S. HIGHWAY 90 EAST
LAKE CITY FL 32055

7. Name and Address of New Registered Agent

Name

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

City   FL   Zip Code

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

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

OFFICERS AND DIRECTORS

				12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	PD	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	MABILE, PAUL G			NAME	
STREET ADDRESS	ROUTE 17 BOX 545			STREET ADDRESS	
CITY-ST-ZIP	LAKE CITY FL 32024			CITY-ST-ZIP	
TITLE	STD	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	MABILE, RHONDA M			NAME	
STREET ADDRESS	ROUTE 17 BOX 545			STREET ADDRESS	
CITY-ST-ZIP	LAKE CITY FL 32024			CITY-ST-ZIP	
TITLE	VD	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	BULLARD, CHRIS A			NAME	
STREET ADDRESS	POST OFFICE BOX 1432			STREET ADDRESS	
CITY-ST-ZIP	LAKE CITY FL 32056			CITY-ST-ZIP	
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY-ST-ZIP				CITY-ST-ZIP	
TITLE		☐ Delete		TITLE	☐ Change ☐ Addition
NAME				NAME	

CR2E034 (9/99)