

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000023710

1. Entity Name

RBX, INCORPORATED

APPROVED
AND
FILED

00 NOV -8 PM 1:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

305 SW 11 COURT
FT LAUDERDALE FL 33315

Mailing Address

305 SW 11 COURT
FT LAUDERDALE FL 33315-1244

2. Principal Place of Business

4400 PGA Blvd.

3. Mailing Address

4400 PGA Blvd.

Suite, Apt. #, etc.

Suite 700

Suite, Apt. #, etc.

Suite 700

City & State

Palm Beach Gardens, FL

City & State

Palm Beach Gardens, FL

Zip

33410

Country

USA

Zip

33410

Country

USA

4. FEI Number

65-0748188

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUELSMAN, WILLIAM
305 SW 11 COURT
FT LAUDERDALE FL 33315

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 ☐ Delete
NAME D
STREET ADDRESS HUELSMAN, WILLIAM
CITY-ST-ZIP 305 SW 11 COURT
FT LAUDERDALE FL 33315

TITLE ☐ Delete
NAME D
STREET ADDRESS SPRIGLE, ROGER M
CITY-ST-ZIP 305 SW 11 COURT
FT LAUDERDALE FL 33315

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

William C. Huelman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William C. Huelman

11/3/00 561-775-4975

Date

Daytime Phone #

CR2E034 (9/99)

pg 2 of 2

November 6, 2000

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: RBX, Incorporated
P97000023710

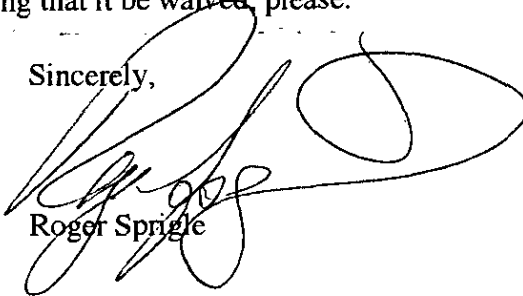
To Whom It May Concern:

I am writing this letter in hopes of not having to pay the penalty fee for being grossly late in having this form and check back to your department.

As you can see by the form we have been moved and I am the one responsible for getting this document taken care of. I have recently been under a doctors care for a very serious illness. I know that that is not an excuse but I am asking that it be taken into consideration.

This is a very small office and frankly it would hurt if we had to pay the late fee so I am asking that it be waived, please.

Sincerely,


Roger Sprigle