

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000031608

1. Entity Name

LAKELAND PARTIES, INC.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90239 007 ***150.00

Principal Place of Business

608 14TH ST W
BRADENTON FL 34205

Mailing Address

608 14TH ST W
BRADENTON FL 34205

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

65-0752996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WOLFE, MARK W
7803 ALHAMBRA DR
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name

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

1115 Marigold Drive
City Bradenton FL 34202

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 \$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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WOLFE, WILLIAM A 553 SUNCREST BLVD. SAVANNAH GA 31410	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WOLFE, ELIZABETH J 7803 ALHAMBRA DR BRADENTON FL 34209	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WOLFE, MARK 1115 MARIGOLD DRIVE BRADENTON FL 34202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DREW, KRISTINE A. 13710 CHESTERSALL DRIVE TAMPA FL 33624	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7803 Alhambra Dr. Bradenton, FL 34209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Mark Wolfe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/5/00

Date

(941) 747-7066

Daytime Phone #

CR2E034 (5/00)

Attachment
D# 8700031608
DW 853941

Mark W. Wolfe
11115 Marigold Drive
Bradenton, Florida 34202
Home Phone (941) 753-7220

September 05, 2000

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To Whom it May Concern:

Much to my surprise, I received a second notice for filing my Uniform Business Report. The report was initially mailed along with a check (#2558) for the amount of \$150.00 but is apparently lost.

On July 7, 2000, I called (850) 487-6059 option 2 and spoke with Tyrone to discuss the missing report and was instructed to wait several weeks to see if the report and check would arrive. August 29, 2000 I again called and spoke with Leslie who stated the report never arrived and to resubmit the report with a new \$150.00 check.

Please waive the penalty fee due to the loss of my initial report. My second attempt will be sent either Certified Mail or Return Receipt to insure I have proof of mailing.

Thank you for your consideration of this matter.

Sincerely -



Mark Wolfe
Lakeland Parties, Inc.