

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 06, 2001 8:00 am
Secretary of State

05-22-2001 90642 015 ***150.00

DOCUMENT # P97000033939

1. Entity Name

Mountaineering Adventures, Inc.

Principal Place of Business

Mailing Address

915 Gamewell Avenue
 Maitland, FL 32751

75693

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

59-3442378

Applied For

Not Applicable

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

Laura Hardy Deglomine
 915 Gamewell Ave.
 Maitland, FL 32751

Name Laura Hardy Deglomine

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

915 Gamewell Ave.

Maitland

City

Maitland

FL

Zip Code

32751

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 *Laura Hardy Deglomine* **7/3/01**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when renewing)

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW IN FEE IS \$150.00
 After MAY 1, 2001 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 Fee

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☒ Delete
NAME	Mark Deglomine	
STREET ADDRESS	915 Gamewell Ave.	
CITY-STATE-ZIP	Maitland, FL 32751	
TITLE	V/T/S	☐ Delete
NAME	Laura Hardy Deglomine	
STREET ADDRESS	915 Gamewell Ave.	
CITY-STATE-ZIP	Maitland, FL 32751	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE	P	☒ Change ☐ Addition
NAME	Laura Hardy Deglomine	
STREET ADDRESS	915 Gamewell Ave.	
CITY-STATE-ZIP	Maitland, FL 32751	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-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: *Laura Hardy Deglomine* **4/1/01** **407-644-4462**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)