

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

04-09-2002 90054 027 ***150.00

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DOCUMENT # P97000036150

1. Entity Name

GENE CLUCKEY ENTERPRISES, INC.

Principal Place of Business

**3880 40TH AVE W.
 BRADENTON FL 34205**

Mailing Address

**3880 40TH AVE W.
 BRADENTON FL 34205**

2. Principal Place of Business

**8513 COUNTESS AVE. CIR.
 Suite, Apt. #, etc.**

3. Mailing Address

**8513 COUNTESS AVE. CIR.
 Suite, Apt. #, etc.**

City & State

PALMETTO FL

City & State

PALMETTO FL

4. FEI Number

59-2823791

Applied For

Not Applicable

Zip

34221

Country

MANATEE

Zip

34221

Country

MANATEE

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CLUCKEY, GENE
 3880 40TH AVE W.
 BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name **GENE CLUCKEY**
 Street Address (P.O. Box Number is Not Acceptable)

8513 COUNTESS AVE. CIRCLE

City **PALMETTO**

FL

Zip Code

34221

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

Gene Cluckey

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

(NOTE: Registered Agent signature required when reinstating)

3-27-02

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, 2002 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 **D** ☐ Delete
 NAME **CLUCKEY, GENE**
 STREET ADDRESS **3880 40TH AVE W.**
 CITY-ST-ZIP **BRADENTON FL 34205**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

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 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
 NAME
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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:

Gene Cluckey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-27-02

Date

941-722-9572

Daytime Phone #

CR2E034 (9/01)