

AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **997000037502**

1. Entity Name

EVERBLOOM, INC.

Principal Place of Business

Mailing Address

560 Volusia Avenue
Pierson, FL 32180

Post Office Box 133
Pierson, FL 32190

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/22/01--01095--002

*****131.25 *****61.25
DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3467097

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Glenn D. Storch, Esquire
420 South Nova Road
Daytona Beach, FL 32114

7. Name and Address of New Registered Agent

Name
William H. McCullough
Street Address (P.O. Box Number is Not Acceptable)
560 S. Volusia Avenue
City
Pierson FL Zip Code
32180

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

William H. McCullough
(NOTE: Registered Agent signature required when reissuing)

7/23/01
DATE

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

FILED IN THE STATE OF FLORIDA
After MAY 11, 2001 Fee will be \$350.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees
FILING FEE: \$61.25

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Raymond N. Wilson 445 Cortez Avenue DeLeon Springs, FL 32130 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Albert Bennett 126 W. Spring Street DeLeon Springs, FL 32130 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Dawn Wilson 445 Cortez Avenue DeLeon Springs, FL 32130 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D William H. McCullough 560 S. Volusia Avenue Pierson, FL 32180 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D Renee H. McCullough 560 S. Volusia Avenue Pierson, FL 32180 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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 or without like empowered.

SIGNATURE:

Albert Bennett

Albert Bennett, Director/V.P. 7/23/01

Date

Daytime Phone #

CR2E034 (11/00)