

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P97000038888**

1. Entity Name

Sammie the Sea Serpent School Supplies, Inc

FILED
Jun 06, 2000 8:00 am
Secretary of State
 06-06-2000 90173 033 ***150.00

Principal Place of Business
8694 Kimble Way
Boca Raton, FL 33433

Mailing Address
8694 Kimble Way
Boca Raton, FL 33433

00056126

2. Principal Place of Business
8694 Kimble Way
 Suite, Apt. #, etc.

3. Mailing Address
8694 Kimble Way
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Boca Raton, FL

City & State
Boca Raton, FL

Zip
33433

Country
USA

4. FEI Number
59-3443569

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
Amy J. Coleman
8694 Kimble Way
Boca Raton, FL 33433

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 _____ (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	NAME	STREET ADDRESS	CITY-ST-ZIP
	Kenneth R. Garrison	1151 SANDDUNE Lane #306	Melbourne, FL 32901

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	AMY J. COLEMAN	8694 KIMBLE Way	BOCA RATON, FL 33433
	VP	JAMES PERRYMAN	8694 KIMBLE Way
		BOCA RATON, FL 33433	

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: **Amy J. Coleman** **May 1, 2000** **5614776248**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)