## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

## P97000038931 **DOCUMENT #**

1. Entity Name

BERNIE LITTLE DISTRIBUTING, INC.



**FILED** Mar 25, 2003 8:00 am Secretary of State

03-25-2003 90072 022 \*\*\*150.00

				OO WE TH					
Principal Place of Business 1314 SW 17TH ST OCALA FL 34474 US		Mailing Address 1314 SW 17TH ST OCALA FL 34474 US							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
	·								unlind For
City & State		City & State			4. F	4. FEI Number 59-3451412			pplied For t Applicable
Zip Country		Zip	Zip Counti		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
-	6. Name and Address of Current	Registered Agent			7. N	ame and Address of New F	egistered A	gent	
	Name								
	I, JAMES W		Street Address			(P.O. Box Number is Not Acceptable)			
	TH TAMPA STREET								
SUITE 2300						1 - *- to -		7:- 0	
TAMPA FL 33602				City			FL	Zip Cod	
	named entity submits this statement for ions of registered agent.							amiliar with,	and accept
•	Signature, typed or printed name of registered agent	and title if applicable. (NOT	rE: Registere	d Agent signature requi	ired when rei	nstating)	DATE		
FILE NOW!!! FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State						Election Campaign Fir Trust Fund Contribution	n.	Added	May Be to Fees
10. '	OFFICERS AND		11.		ADI	DITIONS/CHANGES TO OFF	ICERS AND		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO LITTLE, BERNIE SR. 4105 MAIN AVE. EATON PARK FL 33840	□ Delete		I				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT LITTLE, JANE 4105 MAIN AVE. EATON PARK FL 33840	☐ Delete		I				Change	☐ Addition
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	DS HAME, REBECCA J 4105 MAIN AVE. EATON PARK FL 33840	☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LITTLE, BERNIE JR. 1314 SW 17TH ST OCALA FL 34478	☐ Delete						☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LITTLE, JOSEPH K 4105 MAIN AVE. EATON PARK FL 33840	☐ Delete		1				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete						Change	☐ Addition

12. Thereby certify that the information supplied with this filling 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 trusted empowered to execute his report as solutined by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or trusted empowered to execute changed, or on an attachment with an appress, with all other like

**SIGNATURE:**