

# 2002 UNIFORM BUSINESS REPORT (UBR)

0126724 AV

DOCUMENT # P97000046529

1. Entity Name  
SIMPLY FLORIDA, INC.

FILED

02 OCT -4 PM 2:57

SECRETARY OF STATE



Principal Place of Business

7150 20TH ST  
SUITE A  
VERO BEACH FL 32966

Mailing Address

7150 20TH ST  
SUITE A  
VERO BEACH FL 32966  
US

2. Principal Place of Business

3487 S. US 1 Unit 6

3. Mailing Address

3487 S. US 1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ft. Pierce, FL

City & State

Ft. Pierce FL

4. FEI Number

65-0760430

Applied For

Not Applicable

Zip

Country

34982

Zip

Country

34982

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

LINDSEY, SR, ROBERT J  
6585 12TH STREET  
VERO BCH FL 32966

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

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

(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, 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 PD  
NAME LINDSEY, SR, ROBERT J  
STREET ADDRESS 6585 12TH STREET  
CITY-ST-ZIP VERO BEACH FL 32966 ☐ Delete

TITLE VD  
NAME KASTENSMIDT, MATTHEW T  
STREET ADDRESS 7150 20TH ST SUITE A  
CITY-ST-ZIP VERO BEACH FL 32960-6 ☒ Delete

TITLE TD  
NAME LINDSEY, JR., ROBERT J  
STREET ADDRESS 7150 20TH ST SUITE A  
CITY-ST-ZIP VERO BEACH FL 32966 ☒ Delete

TITLE SD  
NAME LINDSEY, LYNN B  
STREET ADDRESS 6585 12TH ST  
CITY-ST-ZIP VERO BEACH FL 32966 ☐ 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 ☐ Change ☐ Addition  
600008602336  
10/25/02--01121--013 \*\*\$50.00

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

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/3/02 772-460-6945

CR2E034 (9/01)