

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000057588

1. Entity Name

ZAUNER ENTERPRISES, INC.

FILED

Apr 10, 2001 8:00 am
Secretary of State

04-10-2001 90066 003 ***150.00

Principal Place of Business

3375 34TH STREET NORTH #D
ST. PETERSBURG FL 33713

Mailing Address

PO BOX 28134
KENNETH CITY FL 33709-8134

2. Principal Place of Business

9001 PARK BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

201

CITY & STATE
LARGO, FL.

CITY & STATE

Zip
33777

Country
PIN.

Zip

Country

4. FEI Number 59-3456682

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, DOUGLAS E
5219 59TH WAY NORTH
KENNETH CITY FL 33709

Name JOHNSON, DOUGLAS E.

Street Address (P.O. Box Number is Not Acceptable)
8000 93rd Street North

City Seminole

FL

Zip Code 33777

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☐ Delete
NAME JOHNSON, DOUGLAS E
STREET ADDRESS 5219 59TH WAY NORTH
CITY-ST-ZIP KENNETH CITY FL 33709

TITLE P ☐ Change ☐ Addition
NAME JOHNSON, DOUGLAS E.
STREET ADDRESS 8000 93rd Street N
CITY-ST-ZIP Seminole, FL 33777

TITLE ST ☐ Delete
NAME JOHNSON, PATRICIA A
STREET ADDRESS 5219 59TH WAY NORTH
CITY-ST-ZIP KENNETH CITY FL 33709

TITLE ST ☐ Change ☐ Addition
NAME JOHNSON, PATRICIA A.
STREET ADDRESS 8000 93rd Street N
CITY-ST-ZIP Seminole, FL 33777

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/01

Date

(727) 398-0096

Daytime Phone #

CR2E034 (10/00)