

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2001 8:00 am
Secretary of State

07-18-2001 90258 026 ***150.00

0145219 SP

DOCUMENT # P97000068133

1. Entity Name
OCALA'S E-Z RIDERS, INC.

Principal Place of Business
7870 S PINE AVE
OCALA FL 34480-8072
US

Mailing Address
7870 S PINE AVE
OCALA FL 34480
US

A0077975



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7870 S Pine Ave
 Suite, Apt. #, etc.

3. Mailing Address
7870 S Pine Ave
 Suite, Apt. #, etc.

City & State
OCALA FLA

City & State
OCALA FLA

4. FEI Number
59-3465008

Applied For
 Not Applicable

Zip
34480

Country
USA

Zip
34480

Country
USA

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

6. Name and Address of Current Registered Agent

DOCKERY, MICHAEL R
7870 SOUTH PINE AVE.
OCALA FL 34480

7. Name and Address of New Registered Agent

Name **Michael Dockery**
 Street Address (P.O. Box Number is Not Acceptable)
7870 S Pine Ave
 City **OCALA FLA** **FL** **34480**

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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	D	<input type="checkbox"/> Delete
NAME	DOCKERY, MICHAEL R	
STREET ADDRESS	7870 S PINE AVE	
CITY-ST-ZIP	OCALA FL 34480-8072	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOCKERY, DONALD E	
STREET ADDRESS	7870 S PINE AVE	
CITY-ST-ZIP	OCALA FL 34480-8072	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOCKERY, CECILE J	
STREET ADDRESS	7870 S PINE AVE	
CITY-ST-ZIP	OCALA FL 34480-8072	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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

Date

Daytime Phone #

CR2E034 (5/01)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
5050 W. TENNESSEE STREET
TALLAHASSEE, FLORIDA 32399

Attachment
~~0113~~ A0071975

097000068133

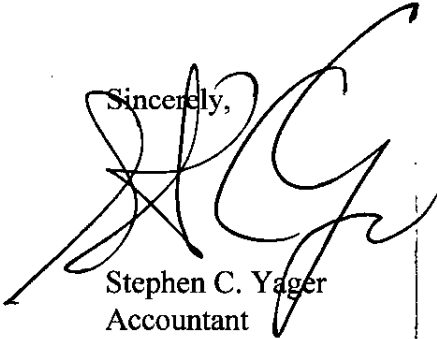
STEPHEN C. YAGER - TAX & ACCOUNTING SERVICE
P.O. BOX 160
OCALA, FLORIDA 34478

re: Corporate annual report for Ocala E/Z Riders, Inc.

Dear FLORIDA DEPARTMENT OF STATE:

This letter is to inform the Florida Department of State that according to me and my clients records no corporate annual report was sent to either location to be filed or paid. My client Ocala E/Z Riders, Inc. (Michael Dockery) has recently received the corporate annual report but with a large penalty added to the normal \$150.00 fee. Since my client has never had this problem in this past we would appreciate the penalty to be waived and the check inclosed in the amount of \$150.00 to be rendered paid in full. Thanks for your consideration..

Sincerely,


Stephen C. Yager
Accountant