

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000069267

1. Entity Name

BIG BASS LODGE, INC.

FILED
Jun 08, 2001 8:00 am
Secretary of State

06-08-2001 90005 009 ***150.00

0602134

554100



DO NOT WRITE IN THIS SPACE

Principal Place of Business

C/O SUNSHINE TAG AGENCY
6807 STATE ROAD 70 EAST
BRADENTON FL 34203

Mailing Address

C/O SUNSHINE TAG AGENCY
6807 STATE ROAD 70 EAST
BRADENTON FL 34203

2. Principal Place of Business

10395 MARINA LN

3. Mailing Address

10395 MARINA LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MOORE HAVEN, FL

City & State

MOORE HAVEN, FL

Zip

33471

Country

SLAORS

Zip

33471

Country

SLAORS

4. FEI Number

65-0773547

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GIGLIOTTI, NICK
C/O SUNSHINE TAG AGENCY
6807 STATE ROAD 70 EAST
BRADENTON FL 34203

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!
After MAY 1, 2001
Make Check Payable to Department of State

FEE IS \$150.00
Fee will be \$550.00

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	RISTER, DAVID B	
STREET ADDRESS	10395 MARINA LANE ROAD 10	
CITY-ST-ZIP	LAKEPORT FL 33471	
TITLE	DST	<input type="checkbox"/> Delete
NAME	RISTER, NANCY A	
STREET ADDRESS	10395 MARINA LAKE ROAD 10	
CITY-ST-ZIP	LAKEPORT FL 33471	
TITLE	DV	<input type="checkbox"/> Delete
NAME	GIGLIOTTI, MARY LOU	
STREET ADDRESS	704 67TH STREET, N.W.	
CITY-ST-ZIP	BRADENTON FL 34209	
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		
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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 empowerers.

SIGNATURE

David B Rister

DAVID B RISTER

PRESIDENT

5-30-01

863 946
1707

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)