

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000072120

1. Entity Name

WOERNER TEXAS MARKETING, INC.

FILED
May 10, 2000 8:00 am
Secretary of State

05-10-2000 90102 041 ***150.00

Principal Place of Business

505 SOUTH FLAGLER DRIVE
SUITE 606
WEST PALM BEACH FL 33401
US

Mailing Address

505 SOUTH FLAGLER DRIVE
SUITE 606
WEST PALM BEACH FL 33401-5945
US

2. Principal Place of Business

777 S. Flagler Dr.

3. Mailing Address

777 S. Flagler Dr.

Suite, Apt. #, etc.

Suite 1100

Suite, Apt. #, etc.

Suite 1100

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

4. FEI Number

65-0779270

Applied For

Not Applicable

Zip

33401

Country

USA

Zip

33401

Country

USA

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

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

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, 2000 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 ☐ Delete
NAME PTD
STREET ADDRESS WOERNER, LARRY J
CITY-ST-ZIP 505 S FLAGLER DRIVE SUITE 606
WEST APLM BCH FL 33401

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 777 S. Flagler Dr., Suite 1100
CITY-ST-ZIP West Palm Beach, FL 33401

TITLE ☐ Delete
NAME SD
STREET ADDRESS WOERNER, LESTER J
CITY-ST-ZIP 505 S FLAGLER DRIVE STE 606
WEST PALM BCH FL 33401

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 777 S. Flagler Dr., Suite 1100
CITY-ST-ZIP West Palm Beach, FL 33401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME AT
STREET ADDRESS Steven A Moses
CITY-ST-ZIP 777 S. Flagler Dr. Suite 1100
West Palm Beach, FL 33401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
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:

Steven A Moses
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00
Date

(561) 835-3747
Daytime Phone #

CR2E034 (9/99)