

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2001 8:00 am
Secretary of State

08-29-2001 90007 047 ***550.00

0072025 AV

DOCUMENT # P97000084664

1. Entity Name,
THIMBELINA INC

Principal Place of Business

**8 VIA MIZNER
 PALM BEACH FL 33480**

Mailing Address

**8 VIA MIZNER
 PALM BEACH FL 33480**

2. Principal Place of Business

7515 South Flagler

3. Mailing Address

7515 South Flagler

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33405

Country

USA

Zip

33405

Country

USA

4. FEI Number

65-0788183

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**MEYER, OSCAR ARRYO
 8 VIA MIZER
 WEST PALM BEACH FL 33480**

7. Name and Address of New Registered Agent

Name **MEYER, OSCAR ARRYO**

Street Address (P.O. Box Number is Not Acceptable)

7515 SOUTH FLAGLER

City

West Palm Beach FL

Zip Code

33405

8. The above named entity submits this statement for the purpose of ch. _____, registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Lucy B Sprunger

8/19/01

8/19/01

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 **P** ☐ Delete
 NAME **SPRUNGER, LUCY B.**
 STREET ADDRESS **2100 CHAGALL CIRCLE**
 CITY-ST-ZIP **WEST PALM BEACH FL 33409**

TITLE **T** ☒ Delete
 NAME **MEYER, OSCAR A.**
 STREET ADDRESS **8 VIA MIZEL**
 CITY-ST-ZIP **WEST PALM BEACH FL 33480**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **President** ☒ Change ☐ Addition
 NAME **SPRUNGER, LUCY B.**
 STREET ADDRESS **7515 South Flagler**
 CITY-ST-ZIP **West Palm Beach, FL 33405**

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

TITLE ☐ Change ☐ Addition
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 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: *Lucy B Sprunger*

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X

Date

8/19/01

Daytime Phone #

CR2E034 (5/01)