

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 18, 2000 8:00 am
Secretary of State
 09-18-2000 90039 044 ***550.00

DOCUMENT # P97000092800

1. Entity Name
JOHN PARNELL INC. DAYTONA

Principal Place of Business
**408 SEABREEZE BLVD.
 DAYTONA BEACH FL 32118**

Mailing Address
**408 SEABREEZE BLVD.
 DAYTONA BEACH FL 32118**

2. Principal Place of Business
408 SEA BREEZE BLVD
 Suite, Apt. #, etc.

3. Mailing Address
408 SEA BREEZE BLVD.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
DayTona Beach FL.
 Zip
32118
 Country
U.S.A.

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DayTona Beach FL.
 Zip
32118
 Country
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4. FEI Number **59-3478801**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

**PANZARELLA, LINDA
 408 SEABREEZE BLVD.
 DAYTONA BEACH FL 32118**

7. Name and Address of New Registered Agent

Name **JANINE PANZARELLA**
 Street Address (P.O. Box Number is Not Acceptable)
408 SEA BREEZE BLVD.
 City **DayTona Beach FL** Zip Code **32118**

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 *Janine Panzarella* **JANINE PANZARELLA** **9-6-00**
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 13, 2000 Min. 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 NAME STREET ADDRESS CITY-ST-ZIP	D PANZARELLA, LINDA 408 SEABREEZE BLVD. DAYTONA BEACH FL 32118	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PANZARELLA, JANINE 408 SEA BREEZE BLVD. DayTona Beach FL 32118	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Janine Panzarella* **JANINE PANZARELLA** **9-6-00** **904-252-8519**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)