

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90936 023 ***150.00

DOCUMENT # P97000094192

1. Entity Name

SAM LUCAS CORP.

Principal Place of Business

7110 MARSTON CT
 UNIVERSITY PARK FL 34201
 US

Mailing Address

6860 GULFPORT BLVD., #900
 S. PASADENA FL 33707-2108
 US

2. Principal Place of Business

6927 RIVERS EDGE ST CIR

Suite, Apt. #, etc.

RIVERCLUB

City & State

BRADENTON FL

Zip

34202

Country

3. Mailing Address

2817 WEST END AVE

Suite, Apt. #, etc.

STE 126 # 202

City & State

NASHVILLE TN

Zip

37203

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0794288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

LIGHT, BRIAN J
 6860 GULFPORT BLVD., #900
 S. PASADENA FL 33707-2108

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!!! FEE IS \$150.00
After MAY 1, 2001 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

TITLE S ☐ Delete
 NAME LIGHT, BRIAN
 STREET ADDRESS 6860 GULFPORT BLVD., #900
 CITY-ST-ZIP S. PASADENA FL 33707

TITLE PTPV ☐ Delete
 NAME LUCAS, SAM
 STREET ADDRESS 6860 GULFPORT BLVD., #900
 CITY-ST-ZIP S. PASADENA FL 33707-2108

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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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:

BILL J. LIGHT, BRIAN LIGHT - Sec

Date

Daytime Phone #

4/24/01

615 860 0225

CR2E034 (10/00)