## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 10, 2000 8:00 am Secretary of State DOCUMENT # **P97000100065** SHAMROCK VENTURES, INC. 03-10-2000 90007 009 \*\*\*150.00 Principal Place of Business Mailing Address 2150 S. FERDON BLVD. 2150 S. FERDON BLVD. **CRESTVIEW FL 32536-8456** CRESTVIEW FL 32536 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3484177 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BEDNAR, MARK A 11 E. ZARAGOZA ST. PENSACOLA FL 32501 8. The above named entity submits this statement for the purpose of changing its registered office or registered or both, in the State of Florida. W. BLOCKER FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Change Addition DS ☐ Delete TITLE TITLE BEDNAR, MARK A NAME NAME STREET ADDRESS STREET ADDRESS 11 E. ZARAGOZA ST. CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32501 Change ☐ Addition TITLE ☐ Delete TITLE NAME WATFORD, JOHN R NAME STREET ADDRESS STREET ADDRESS 2150'S FERDON BLVD CITY-ST-ZIP CITY-ST-ZIP **CRESTVIEW FL 32536** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME WATFORD, JAMES D NAME STREET ADDRESS 2150 S FERDON BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32536 ☐ Change Addition ☐ Delete TITLE ΠV TITLE NAME BLOCKER, DARREL G NAME STREET ADDRESS STREET ADDRESS 2150 S FERDON BLVD CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32536 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME BLOCKER, KENNETH W NAME STREET ADDRESS STREET ADDRESS 2150 S FERDON BLVD CITY-ST-ZIP CITY-ST-ZIP CRESTVIEW FL 32536 □ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME

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

STREET ADDRESS

CITY-ST-7IP

**SIGNATURE:** 

STREET ADDRESS

CITY-ST-ZIP