

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P97000101037**

1. Entity Name

RICHARD PLUMER DESIGN, INC.**FILED****Jan 23, 2001 8:00 am**
Secretary of State

01-23-2001 90115 047 ***158.75

Principal Place of Business

**425 S. OLIVE AVENUE
WEST PALM BEACH FL 33401**

Mailing Address

**425 S. OLIVE AVENUE
WEST PALM BEACH FL 33401**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0885681**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent****7. Name and Address of New Registered Agent****POWELL, GILBERT
425 S. OLIVE AVENUE
WEST PALM BEACH FL 33401**

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 \$500.00
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	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	P			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	MOONEY, STEPHEN	243 RUSSLYN DRIVE	WEST PALM BEACH FL 33405						
	VP			<input type="checkbox"/> Delete		VP			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	POWELL, GILBERT	798 BOTTON BAY DR W #1413	WEST PALM BEACH FL 33406			POWELL, GILBERT	17890 121st Terrace, North		
	S			<input type="checkbox"/> Delete		S	Jupiter, Florida 33478		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	LABBETT, DEREK	2100 S. OCEAN LN #1505	FT. LAUDERDALE FL 33316			LABBETT, DEREK	302 Via Linda		
				<input type="checkbox"/> Delete			Palm Beach, Florida 33480		<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEREK LABBETT

Date

01/11/01 (561) 832.8999

Daytime Phone #

CR2E034 (10/00)