

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90004 044 ***150.00

0108961 AT

DOCUMENT # P97000106146

1. Entity Name
HESTER PLOW CO., INC.

Principal Place of Business

E WASHINGTON ST
LAKE CITY FL 32055
US

Mailing Address

P O BOX 340
LAKE CITY FL 32056
US

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
59-3485593

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

PEACOCK, ERNEST R
E WASHINGTON ST
LAKE CITY FL 32055

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 \$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	D	<input type="checkbox"/> Delete
NAME	PEACOCK, ERNEST R	
STREET ADDRESS	RT. 4 BOX 3800	
CITY-ST-ZIP	LAKE BUTLER FL 32054	
TITLE	ST	<input type="checkbox"/> Delete
NAME	PEACOCK, GAIL W	
STREET ADDRESS	RT 4 BOX 3800	
CITY-ST-ZIP	LAKE BUTLER FL 32054	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Ernest Peacock
ERNEST PEACOCK

7/3/01

386-755-0960
904-755-0960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment

HESTER PLOW CO., Inc.

Doc. # P97000106146



Patentees & Manufacturers

P. O. Box 340 - Washington St. at Eloise
LAKE CITY, FLORIDA 32056 U.S.A.
Phone (904) 755-0960
Fax (904) 755-0961

BOW 59826

July 3, 2001

Florida Department of State
Division of Corporations

To Whom It May Concern:

I have just received this document # P97000106146, 2001 Uniform Business Report today. If I received the first one I am not aware of it. I also have asked my secretary that would have received this for me and she does not remember it either.

Had I received it and it was brought to my attention, I would have filed it on time. I am asking you to please waiver the \$ 400.00 difference. I am enclosing \$ 150.00. If this is not acceptable please let me know. I hope that you will consider this request and remove the penalty.

Please call me if you have any questions about this matter.

Cordially,

Ernest Peacock
EP:kw.