

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000010553

1. Entity Name
FLORIDA XTREME INCORPORATED

Principal Place of Business
200 EAST ROBINSON STREET STE. 500
ORLANDO FL 32801

Mailing Address
200 EAST ROBINSON STREET STE. 500
ORLANDO FL 32801

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 59-3495855

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

OWEN, MARIAN L
1509 SUNSET POINTE PLACE
KISSIMMEE FL 34744

Name FLORIDA CORPORATE SUPPORT, INC.
Street Address (P.O. Box Number is Not Acceptable)
200 E. ROBINSON ST, Ste 500
City ORLANDO FL Zip Code 32801

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: BY: *M. Sturges* *1/27/00*
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing) 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME OWEN, PHILLIP C
STREET ADDRESS 1509 SUNSET POINT PLACE
CITY-ST-ZIP KISSIMMEE FL 34744 ☐ Delete

TITLE
NAME PHILLIP D. OWEN
STREET ADDRESS V. Pres. D. 1842 SAILFISH CT.
CITY-ST-ZIP KISSIMMEE, FL. 34744 ☐ Change ☒ Addition

TITLE SD
NAME ALLEN, REBECCA D
STREET ADDRESS 2215 CATBRIAR WAY
CITY-ST-ZIP OVIEDO FL 32765 ☒ Delete

TITLE
NAME AMIE E. OWEN
STREET ADDRESS SEC. D. 1842 SAILFISH CT.
CITY-ST-ZIP KISSIMMEE, FL. 34744 ☐ Change ☒ Addition

TITLE D
NAME OWEN, MARIAN L
STREET ADDRESS 1509 SUNSET POINTE PLACE
CITY-ST-ZIP KISSIMMEE FL 34744 ☐ Delete

TITLE
NAME MARIAN L. OWEN
STREET ADDRESS 1509 SUNSET POINTE PLACE
CITY-ST-ZIP KISSIMMEE, FL. 34744 ☒ Change ☐ Addition

TITLE D
NAME SCHEID, AMY R
STREET ADDRESS 14 MINNEHAHA CIRCLE
CITY-ST-ZIP MAITLAND FL 32751 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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: *Phillip C. Owen* 7-16-00 407-933-7497
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)

Attachment

P980000010553

00016517

LAW OFFICES OF
HENDRY, STONER, SAWICKI & BROWN

PROFESSIONAL ASSOCIATION

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CERTIFIED MEDIATOR

G. STEVEN BROWN
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MARCOS A. CIGAGNA
ADMITTED IN BRAZIL ONLY

JACQUELINE E. DANZER
ADMITTED IN VENEZUELA ONLY

July 28, 2000

Division of Corporations
Annual Report Filings
409 East Gaines Street
Tallahassee, Florida 32399

Re: 2000 Uniform Business Report (UBR)

Please find enclosed the following Uniform Business Report together with the respective filing fee:

P98000010553

Florida Xtreme Incorporated

\$550.00

Very truly yours,


G. Steven Brown

GSB/mes
Enclosure