

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000013737

1. Entity Name

TOWNSEND DEVELOPMENT, INC.

FILED
Apr 14, 2000 8:00 am
Secretary of State

04-14-2000 90097 016 ***150.00

Principal Place of Business

Mailing Address

1449 SW HUTCHINS ST.
PORT ST. LUCIE FL 34983

1449 SW HUTCHINS ST.
PORT ST. LUCIE FL 34983-3043

2. Principal Place of Business

304 TORPEY RD

3. Mailing Address

304 TORPEY RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FORT PIERCE FL.

City & State

FORT PIERCE FL.

4. FEI Number

65-0819802

Applied For

Not Applicable

Zip

34946

Country

USA

Zip

34946

Country

USA

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

REEDER, MARK T
1449 SW HUTCHINS ST.
PORT ST. LUCIE FL 34983

Name

REEDER, MARK T

Street Address (P.O. Box Number is Not Acceptable)

304 TORPEY RD.

City

FORT PIERCE

FL

Zip Code

34946

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, 2000 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 P
NAME REEDER, MARK
STREET ADDRESS 1449 SW HUTCHINS ST
CITY-ST-ZIP PORT ST LUCIE FL 34983 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME REEDER, MARK T.
STREET ADDRESS 304 TORPEY RD
CITY-ST-ZIP FORT PIERCE FL 34946 ☒ Change ☐ Addition
ADDRESSES ONLY

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

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

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

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

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:

Mark T. Reeder MARK T. REEDER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 APR 2000

Date

561-464-0545

Daytime Phone #

CR2E034 (9/99)