

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000017104

1. Entity Name

IMC SERVICES, INC.

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90136 015 ***158.75

Principal Place of Business

2451 MCMULLEN BOOTH
208 AND 210
CLEARWATER FL 33759
US

Mailing Address

1658 STABLE TRAIL
PALM HARBOR FL 34685

2. Principal Place of Business

2451 McMullen Booth

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite 243

Suite, Apt. #, etc.

u

City & State

Clearwater, FL

City & State

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Zip

33759

Country

Pinellas

Zip

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Country

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4. FEI Number

59-3493795

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BOULEVARD #211
PALM BEACH GARDENS FL 33418

7. Name and Address of New Registered Agent

Name

Charles Dayhoff, III

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

3830 Tampa Road, Suite 150

City

Palm Harbor

FL

Zip Code

34684

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

Charles Dayhoff III

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when re-instating)

DATE

4/16/01

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 \$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
NAME
STREET ADDRESS
CITY-ST-ZIP

PTSD
FERRELL, KEVIN D
1658 STABLE TRAIL
PALM HARBOR FL 34685

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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☐ 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:

Kevin D. Ferrell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/16/01 (727) 793-0081

Daytime Phone #

CR2E034 (10/00)

0427319