

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000028177

1. Entity Name

BEE TREE RECREATION, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90155 045 ***150.00

Principal Place of Business

Mailing Address

801 FRENCH CREEK LANE
FT. PIERCE FL 34982

801 FRENCH CREEK LANE
FT. PIERCE FL 34982-8304

2. Principal Place of Business

3. Mailing Address

803 French Cr Ln

803 French Cr Ln

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

FT. PIERCE, FL

FT. PIERCE, FL

4. FEI Number

65-0824851

Applied For

Not Applicable

Zip

Country

34982

USA

Zip

Country

34982

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

EBNER, C. TRENT
803 FRENCH CREEK LANE
FT PIERCE FL 34982

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME SIMS, DAVID
STREET ADDRESS 1050 COLONIAL RD
CITY-ST-ZIP FT. PIERCE FL 34950 ☒ Delete

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

TITLE ST
NAME EBNER, C. TRENT
STREET ADDRESS 803 FRENCH CREEK LANE
CITY-ST-ZIP FT. PIERCE FL 34982 ☐ Delete

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

TITLE P
NAME TRUSS, DAVE
STREET ADDRESS 801 FRENCH CREEK LANE
CITY-ST-ZIP FT. PIERCE FL 34982 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/00

Date

561-466-0561

Daytime Phone #

CR2E034 (9/99)