

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000030173

1. Entity Name

THE BRIG OF DAYTONA, INC.

FILED

Mar 15, 2000 8:00 am
Secretary of State

03-15-2000 90082 019 ***150.00

Principal Place of Business

Mailing Address

710 E INTERNATIONSL SPEEDWAY
DAYTONA BEACH FL 32118
US

215 SOUTH GRANDVIEW AVENUE
DAYTONA BEACH FL 32118-4354

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

133 VERMONT AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DAYTONA BEACH, FL

4. FEI Number

59-3505361

Applied For

Not Applicable

Zip

Country

Zip

Country

32118

US

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

WILSON, W. A
215 SOUTH GRANDVIEW AVE
DAYTONA BEACH FL 32118

Name Edward Carter

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

133 Vermont Ave

City

Daytona Beach FL

Zip Code

32118

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

Edward Carter

2-14-00

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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD WILSON, WALTER A JR 215 SOUTH GRANDVIEW AVENUE DAYTONA BEACH FL 32118	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD Edward Eugene Carter 133 Vermont Ave Daytona Beach FL 32118	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Edward Carter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Edward Carter 2-14-00

904-527-5161