

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000030666

1. Entity Name

RANDALL & WALTERS, INC.

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

04-24-2000 90004 040 \*\*\*150.00

Principal Place of Business

Mailing Address

8805 TAMiami TRAIL. NORTH  
#207  
NAPLES FL 34108  
US

8805 TAMiami TRAIL. NORTH  
#207  
NAPLES FL 34108-2525  
US

2. Principal Place of Business

500 L'AMBIANCE Cr

3. Mailing Address

500 L'AMBIANCE Cr

Suite, Apt. #, etc.

#203

Suite, Apt. #, etc.

#203

City & State

NAPLES FL

City & State

NAPLES FL

4. FEI Number

65-0824810

Applied For

Not Applicable

Zip

34108

Country

USA

Zip

34108

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZOLKIEWICZ, RONALD  
500 L'AMBIANCE CIRCLE  
#203  
NAPLES FL 34108

7. Name and Address of New Registered Agent

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: *Ronald J. Wicker*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/3/00

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 VP  
NAME ZOLKIEWICZ, RONALD  
STREET ADDRESS 500 L'AMBIANCE CIRCLE, #203  
CITY-ST-ZIP NAPLES FL 34108 ☐ Delete

TITLE PRES  
NAME KENNETH R. WICKER  
STREET ADDRESS 8468 ABBINGTON Cr #2112  
CITY-ST-ZIP NAPLES, FL 34108 ☐ 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 ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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

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

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

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

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: *Ronald J. Wicker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/00  
Date

941-593-5372  
Daytime Phone #

CR2E034 (9/99)