

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000031648

1. Entity Name

WISE CHOICE OF BREVARD, INC.

FILED
Jul 31, 2000 8:00 am
Secretary of State

07-31-2000 90009 016 ***150.00

Principal Place of Business

4020 SHUTTLE COURT
MERRITT ISLAND FL 32953

Mailing Address

4020 SHUTTLE COURT
MERRITT ISLAND FL 32953

R



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3507415**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TODD, NANCY L
4020 SHUTTLE COURT
MERRITT ISLAND FL 32953

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **D** ☒ Delete
NAME TODD, NANCY L
STREET ADDRESS 4020 SHUTTLE COURT
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE **D** ☐ Change ☒ Addition
NAME *Steve Weise*
STREET ADDRESS *4020 Shuttle Court*
CITY-ST-ZIP *Merritt Island FL 32953*

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-26-00
Date

Daytime Phone #

CR 2 E034 (1/97)

July 24, 2000

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

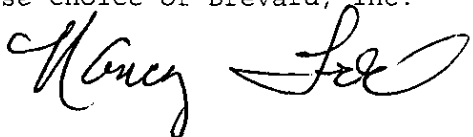
Please find enclosed our company's check for \$150.00 to cover the annual corporation fee for 2000.

The reason for the late filing is that we did not receive the original report. This is the first report that we received to complete.

Based on the above reason, we ask for the penalties to be waived.

Thank you for your consideration

Wise Choice of Brevard, Inc.

A handwritten signature in cursive script, appearing to read "Nancy Lee".