

2000 UNIFORM BUSINESS REPORT (UBR)

5/15/

FILED
Jul 19, 2000 8:00 am
Secretary of State

05-15-2000 90228 042 ***150.00

DOCUMENT # P98000041960

1. Entity Name

12600 CORPORATION

Principal Place of Business

Mailing Address

12600 S BELCHER RD. 104-C
 LARGO FL 33771

12600 S BELCHER RD. 104-C
 LARGO FL 33773-1643

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

Applied For

Not Applicable

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

GEIGER, WILLIAM Z
 12600 S BELCHER RD, 104-C
 LARGO FL 33771

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD GEIGER, WILLIAM Z 12600 S BELCHER RD, 104-C LARGO FL 33771 <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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

Date

Daytime Phone #

CR2E034 (9/99)

Doc # P98000041960

308450

12600 CORPORATION
7850 ULMERTON ROAD, SUITE 8
LARGO, FL 33771
July 12, 2000

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

RE: P98000041960

ATTN: ANNUAL REPORTS SECTION:

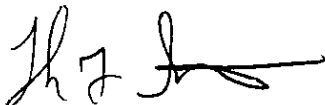
WE ARE IN RECEIPT OF YOUR NOTICE REGARDING "THE FEDERAL
EMPLOYER IDENTIFICATION NUMBER" OF OUR COMPANY.

OUR COMPANY'S FEI IS 59-3605048.

PLEASE NOTE THAT ON MAY 1, 2000 OUR OFFICE MOVED TO THE ABOVE
ADDRESS, AND THAT TWO KEY EMPLOYEES LEFT OUR FIRM. YOUR
NOTICE DID EVENTUALLY COME TO THE CORRECT OFFICE.
UNFORTUNATELY, ARRIVING IN THIS OFFICE AFTER THE "DUE" DATE.

WE ARE SORRY ABOUT THE DELAY, AND ACCORDINGLY, WE ARE
REQUESTING THAT IN LIGHT OF THE CHANGES NOTED ABOVE THAT WE
MIGHT BE EXCUSED FROM THE "LATE" FILING FEE. ANY QUESTIONS
REGARDING THIS LETTER MAY BE DIRECTED TO MY ATTENTION AT 727
536 0955.

SINCERELY:



THOMAS F. SMITH

Enc.