## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Mar 02, 2000 8:00 am DOCUMENT # P98000061583 **Secretary of State** ESPIRIT DE CORPS, INC. 03-02-2000 90124 021 \*\*\*150.00 Mailing Address Principal Place of Business 2109 60TH DR. E. 3409 47TH AVENUE EAST **BRADENTON FL 34203-5038 BRADENTON FL 34203** U00124ga 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0859535 Not Applicable \$8.75 Additional Country Żip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BANFILL, GREGG A Street Address (P.O. Box Number is Not Acceptable) 3409 47TH AVENUE EAST **BRADENTON FL 34203** Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Delete TITLE BANFILL, GREGG A NAME 3409 47TH AVENUE EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** ☐ Addition ☐ Change Delete TITLE. KONICOV-BANFILL, STEPHANIE NAME NAME STREET ADDRESS 3409 47TH AVENUE EAST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34203** ☐ Addition TITLE: Change -☐ Delete TITLE BEGLEY, ANTHONY NAME STREET ADDRESS 6415 FORRESTER STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34202** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE BEGLEY, ALISA NAME NAME

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.

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

C/TY-ST-7/P

TITLE

NAME

TITLE

NAME

6415 FORRESTER

**BRADENTON FL 34202** 

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Delete

☐ Delete

2-1-00 9477524821

☐ Change

☐ Addition

☐ Addition