

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2001 8:00 am
Secretary of State

01-13-2001 90064 006 ***150.00



DO NOT WRITE IN THIS SPACE

DOCUMENT # P98000061583

1. Entity Name
ESPIRIT DE CORPS, INC.

Principal Place of Business
**3409 47TH AVENUE EAST
 BRADENTON FL 34203**

Mailing Address
**2109 60TH DR. E.
 BRADENTON FL 34203**

2. Principal Place of Business
6415 FORRESTER DR.

3. Mailing Address
6415 FORRESTER DR.

City & State
BRADENTON FL

City & State
BRADENTON FL

Zip
34202

Country
USA

4. FEI Number
65-0859535

Applied For
☐ Not Applicable

5. Certificate of Status Desired
☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**BANFILL, GREGG A
 3409 47TH AVENUE EAST
 BRADENTON FL 34203**

7. Name and Address of New Registered Agent
 Name
BEGLEY, ANTHONY
 Street Address (P.O. Box Number is Not Acceptable)
6415 FORRESTER DR.
 City
BRADENTON FL Zip Code
34202

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 *A.J. Begley* *ANTHONY BEGLEY, PRES* *1-8-01*
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. ☐ **FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 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	D BANFILL, GREGG A 3409 47TH AVENUE EAST BRADENTON FL 34203 <input checked="" 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	D KONICOV-BANFILL, STEPHANIE 3409 47TH AVENUE EAST BRADENTON FL 34203 <input checked="" 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	D BEGLEY, ANTHONY 6415 FORRESTER BRADENTON FL 34202 <input checked="" type="checkbox"/> Delete Do Not	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT <input checked="" 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: *A.J. Begley* *ANTHONY BEGLEY* *1-8-01* *941-758-4772*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)