

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 28, 2003 8:00 am
Secretary of State

08-28-2003 90066 015 ***550.00

DOCUMENT # P98000067010

1. Entity Name
OVERLOOK, INC.



Principal Place of Business
**2030-2 THOMASVILLE ROAD
TALLAHASSEE FL 32312**

Mailing Address
**2030-2 THOMASVILLE ROAD
TALLAHASSEE FL 32312**



2. Principal Place of Business
1934 Dellwood Drive
Suite, Apt. #, etc.

3. Mailing Address
1934 Dellwood Drive
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Tallahassee, Florida

City & State
Tallahassee, Florida

4. FEI Number **59-3525476**

Applied For
☐ Not Applicable

Zip Country
32303 USA

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32303 USA

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

**EARNHART, PAUL M
2030-2 THOMASVILLE ROAD
TALLAHASSEE FL 32312**

Name
Earnhart, Paul M.
Street Address (P.O. Box Number is Not Acceptable)
1934 Dellwood Drive
City **Tallahassee** **FL** Zip Code **32303**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Paul M. Earnhart, Pres.*
Signature, typed or printed name of registered agent and title if applicable.

8-27-03
DATE

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P EARNHART, PAUL 2030-2 THOMASVILLE ROAD TALLAHASSEE FL 32312	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC EARNHART, PAUL M 2030-2 THOMASVILLE RD TALLAHASSEE FL 32312	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS PINKERTON, BILL R 2030-2 THOMASVILLE RD TALLAHASSEE FL 32312	☐ 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	P Earnhart, Paul 1934 Dellwood Drive Tallahassee, FL 32303	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC Earnhart, Paul M. 1934 Dellwood Drive Tallahassee, FL 32303	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Pinkerton, Bill R. 1934 Dellwood Drive Tallahassee, FL 32303	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Paul M. Earnhart*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-27-03
Date

386-2773
Daytime Phone #

CR2E034 (10/02)