

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 19, 2000 8:00 am
Secretary of State
 05-19-2000 90009 028 ***150.00

DOCUMENT # **P98000070845**

1. Entity Name
Envoy Financial Services, Inc.

Principal Place of Business Mailing Address
101 Philippe Parkway #302 Safety Harbor, FL 34695 **same**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State
 Zip Country Zip Country

00090052

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Richard Flanigan - 1204 St. Tropez Cir. Orlando, FL 32806

7. Name and Address of New Registered Agent
 Name **Thomas P. McNamara**
 Street Address (P.O. Box Number is Not Acceptable) **2909 Bay to Bay Blvd. Suite 309**
 City **Tampa** FL Zip Code **33629**

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 **4/24/00**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	
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Richard E. Flanigan, Sr.
101 Philippe Parkway, #302
Safety Harbor, FL 34695

D. V. P. Michael D. Flanigan
101 Philippe Parkway, #302
Safety Harbor, FL 34695

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: **Richard E. Flanigan, Sr.** **Richard E. Flanigan, Sr.** **4/25/00** **(727) 669-6767**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)