

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000077412

1. Entity Name Marny's Creations, Inc.

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90048 022 \*\*\*150.00

**B0083671**

Principal Place of Business  
 315 S. Calhoun Street  
 Suite 350  
 Tallahassee, FL 32301

Mailing Address  
 315 S. Calhoun Street  
 Suite 350  
 Tallahassee, FL 32301

2. Principal Place of Business  
 315 S. Calhoun Street  
 Suite, Apt. #, etc.  
 Suite 350

3. Mailing Address  
 315 S. Calhoun Street  
 Suite, Apt. #, etc.  
 Suite 350

City & State  
 Tallahassee, FL

City & State  
 Tallahassee, FL

Zip  
 32301

Country  
 US

Zip  
 32301

Country  
 US

4. FEI Number  
 59-3603899

Applied For  
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

## 6. Name and Address of Current Registered Agent

Kristen C. Brooks  
 315 S. Calhoun Street  
 Suite 350  
 Tallahassee, FL 32301

## 7. Name and Address of New Registered Agent

Name  
 Barrett G. Johnson

Street Address (P.O. Box Number is Not Acceptable)  
 315 S. Calhoun Street

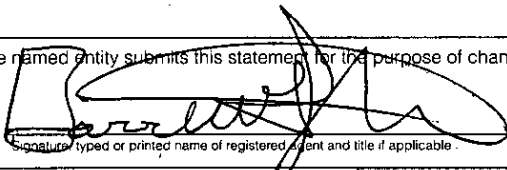
Suite 350

City  
 Tallahassee

FL

Zip Code  
 32301

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  (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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

President & Director ☐ Delete  
 Merry Ann Johnson  
 315 S. Calhoun Street, #350  
 Tallahassee, FL 32301

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

Secretary & Treasurer ☐ Delete  
 Barrett G. Johnson  
 315 S. Calhoun Street, #350  
 Tallahassee, FL 32301

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

☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #