

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101320

1. Entity Name

PRIDDIS, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90203 042 ***150.00

Principal Place of Business

Mailing Address

801 SUNSET DR.
MELBOURNE FL 32935

801 SUNSET DR.
MELBOURNE FL 32935-5843

00003633

2. Principal Place of Business

3. Mailing Address

8160 S. ORANGE AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO FLORIDA

City & State

Zip

32809

Country

USA

Zip

Country

4. FEI Number

APPLIED FOR
59-3560166

Applied For
Not Applied

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

POTTER, FREDERICK J
801 SUNSET DR.
MELBOURNE FL 32935

Name

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

City

FL

Zip Code

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

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.
(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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
POTTER, FREDERICK J
801 SUNSET DR.
MELBOURNE FL 32935 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
POTTER, DOLORES L
42 SUNRISE WAY
PRIDDIS ALBEATR CANADA TO-LIWO ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐
PRIDDIS ALBERTA CANADA TOL IWO

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
POTTER, KARIN A
42 SUNRISE WAY
PRIDDIS ALBERTA CANADA TO-LIWO ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐
PRIDDIS ALBERTA CANADA TOL IWO

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
POTTER, CHRISTOPHER
317 EAST SIDE CRES
HAMILTON ONTARIO CANADA L7-R348 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BATTISTELLI, PADLO
801 SUNSET DR.
MELBOURNE FL 32935 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐
BATTISTELLI, PAOLO

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐

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:

Fredrick J Potter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/06/00 (407) 854-7600