

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000108052

1. Entity Name

MARLEIGH INVESTMENT GROUP, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90152 011 ***158.75

Principal Place of Business

Mailing Address

P.O. BOX 3143
SPRING HILL FL 34611

P.O. BOX 3143
SPRING HILL FL 34611-3143

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3561184

Applied For

Not Applicable

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

CLARK, LEIGH A
2170 WATERFALL DR.
SPRING HILL FL 34608

Name

MARGARET-ANN CLARK

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

2170 WATERFALL DR.

City

SPRING HILL

FL

Zip Code

34608

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

Margaret Ann Clark

Leigh A Clark

4-11-00

Signature, typed or printed name of registered agent only. If applicable, file.

MARGARET-ANN CLARK, VP

(NOTE: Registered Agent for corporation required when re-registering)

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	<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PRESIDENT	LEIGH A. CLARK	P.O. Box 3143	SPRING HILL FL 34611		
V, T, S	MARGARET-ANN CLARK	P.O. Box 3143	SPRING HILL, FL 34611		

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:

Margaret Ann Clark, VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGARET-ANN CLARK, VP

4-11-00

Date

352-686-9844

Daytime Phone #