2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000004522 Jun 03, 2000 8:00 am 1. Entity Name . . FLORIDA INVESTMENT ENTERPRISES, INC. **Secretary of State** 06-03-2000 90016 001 ***150.00 Principal Place of Business Mailing Address 06-03-2000 90016 002 *****8.75 THE W. SOTH DRIVEY 7 N. W. 36TH DRIVE GAINESVILLE FL 32602 Post Office Box 789 Gainesville, Florida 32602-0789 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State *5*9~9585524 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DANIEL, M. RAYMOND Street Address (P.O. Box Number is Not Acceptable) 7 N. W. 36TH DRIVE **GAINESVILLE FL 32602** City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. (66/6)Change Addition ☐ Delete TITLE TITLE DANIEL, M. RAYMOND NAME NAME STREET ADDRESS STREET ADDRESS 7 N. W. 36TH DRIVE CITY-ST-ZIP CITY-ST-ZIP **GAINESVILLE FL 32602** Chance ☐ Addition n ☐ Delete TITLE TITLE WIGFALL, LOUIS V NAME NAME STREET ADDRESS 7 N. W. 36TH DRIVE STREET ADDRESS CITY-ST-ZIP CHY-ST-78P GAINESVILLE FL 32602 ☐ Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CHY-ST-ZIP Change Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 excelute 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: Daytime Phone 6



FLORIDA DEPARTMENT

Fatherine Harris

May 12, 2000

FLORIDA INVESTMENT ENTERPRISES, INC. PO BOX 789
GAINESVILLE, FL 32602

Subject: FLORIDA INVESTMENT ENTERPRISES, INC.

Reference Number: P99000004522

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The check submitted is not payable to this office. Please make your check payable to the Department of State.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

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ANNUAL REPORTS SECTION