

2000 UNIFORM BUSINESS REPORT (UBR)DOCUMENT # **p99000018283**

1. Entity Name

Fuman Skeeto, Inc.**FILED****00 NOV -2 AM 9:29****SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

Mailing Address

2. Principal Place of Business

8171 Lake Serene Dr.
Suite, Apt. #, etc.

3. Mailing Address

Same
Suite, Apt. #, etc.**REINSTATEMENT** *DO NOT WRITE IN THIS SPACE* **2000**

City & State

Orlando, FL

City & State

4. FEI Number

59-3565052

Applied For

Not Applicable

Zip

32836

Country

USA

Zip

Country

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

6. Name and Address of Current Registered Agent

David H. Hanna, Jr.
7380 Sand Lake Rd., Ste. 340
Orlando, FL 32819

7. Name and Address of New Registered Agent

Name

Andrew Beal

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

7109-429 Yacht Basin Ave.

City

Orlando

FL

Zip Code

32835

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

Andrew Beal**10/14/00**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 \$350.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
President/CEO	Danielle Raabe	8171 Lake Serene Dr.	Orlando, FL 32836	☐
Vice President/CFO	Christopher A. Kirkpatrick	8171 Sand Lake Serene Dr.	Orlando, FL 32836	☐
Treasurer	Christopher A. Kirkpatrick	8171 Lake Serene Dr.	Orlando, FL 32836	☐
Secretary	Danielle Raabe	8171 Lake Serene Dr.	Orlando, FL 32836	☐
				☐
				☐

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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 of 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: