## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 27, 2001 8:00 am Secretary of State DOCUMENT # P9900026641 MIKE HEATH & SONS, INC. 04-27-2001 90403 036 \*\*\*150.00 Principal Place of Business Mailing Address 7710 41 ST AVE. E. 7710 41 ST AVE. E. **BRADENTON FL 34202 BRADENTON FL 34202** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0906367 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HEATH, MICHAEL L SR Street Address (P.O. Box Number is Not Acceptable) 7710 41ST AVE. E. **BRADENTON FL 34202** 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) DATE 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE HEALTH, MICHAEL L SR. NAME NAME STREET ADDRESS 7710 41ST AVE. E. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34202** Change ☐ Addition □ Delete TITLE HEATH, JOSHUA NAME NAME STREET ADDRESS STREET ADDRESS 7710 41ST AVE. E. CITY-ST-7IP CITY-ST-ZIP **BRADENTON FL 34202** Delete TITI F Change ☐ Addition TITLE NAME HEATH, MICHAEL L NAME STREET ADDRESS 7710 41 AVE E STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34202** CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

SIGNATURE: Michael L. Heath In. Michael L. Heath Sr. 941-746-0812

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.