

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000028487

1. Entity Name
STARRSCAPE, INC.

R

FILED
Jul 25, 2000 8:00 am
Secretary of State

07-25-2000 90096 038 ***158.75

Principal Place of Business

47 NORWICH CIRCLE
NICEVILLE FL 32578

Mailing Address

47 NORWICH CIRCLE
NICEVILLE FL 32578

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

59-3384340

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STARR, MARC
47 NORWICH CIRCLE
NICEVILLE FL 32578

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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
D
STARR, MARC
47 NORWICH CIRCLE
NICEVILLE FL 32578 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PIV/TIS/D
Starr Marc
47 Norwich Circle
Niceville, FL 32578 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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 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:

Marc Starr **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 10, 2000

(880) 897-1197

CR2E034 (5/00)

999060020487
B0103516

Starrscape, Inc.
47 Norwich Circle
Niceville, FL 32578
(850) 897-1147

July 10, 2000

To Whom It May Concern:
Division of Corporations
P.O Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

This letter is in regards to the bill I received in the latter part of June 2000. It stated that the renewal fee for the year 2000 was \$550.00. To my understanding, it is only supposed to be \$150.00. In the end of June, I called The Division of Corporations and talked to a woman named Kristen. I told her that I did not receive any renewal forms in the beginning of the year and that I would fill out the information quickly and send it back. She told me to enclose a check for \$150.00, and the fee would be waived. If I would have received this form earlier in the year, I would have filled it out and sent it in much earlier. Thanks for your understanding.

Sincerely,



Marc Starr