

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P99000030734**

1. Entity Name

FLORIDA AQUACULTURE RESEARCH & MARINE SCIENCE, I**FILED**
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90013 045 ***550.00

Principal Place of Business

**218 S WEBB RD
PLANT CITY FL 33566**

Mailing Address

**218 S WEBB RD
PLANT CITY FL 33566**

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

65-0909293

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**TANNER, JAY M
6611 HAYTER DRIVE
LAKELAND FL 33813**

7. Name and Address of New Registered Agent

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TANNER, JAY M
6611 HAYTER DRIVE
LAKELAND FL 33813** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SAENZ, KAREN
4830 DOSSEYWOOD CT
LAKELAND FL 33811** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CAMPBELL, MARTHA E
415 LAKEVIEW AVE
SEFFNER FL 33584** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERNDON, LEE R JR
13005 SEA CRITTER LANE
DOVER FL 33527** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HERNDON, TERESA R
13005 SEA CRITTER LANE
DOVER FL 33527** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
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:

SIGNATURE REQUIRED
JAY M. TANNERDate
7-5-00Daytime Phone #
863-644-7907