

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000031907

1. Entity Name

SEWER SHIELD INCORPORATED

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90106 039 ***150.00

Principal Place of Business

701 VIA BELLE
WINTER PARK FL 32792

Mailing Address

701 VIA BELLE
WINTER PARK FL 32789-2717

2. Principal Place of Business

110 ATLANTIC DR.

Suite, Apt. #, etc.

SUITE 100

City & State

MAITLAND, FL

Zip

32751

Country

3. Mailing Address

110 ATLANTIC DR.

Suite, Apt. #, etc.

100

City & State

MAITLAND, FL

Zip

32751

Country

4. FEI Number

59-3590302

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PRATT, JAMES R
369 N. NEW YORK AVE., 3RD FLOOR
WINTER PARK FL 32789

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 D ☒ Delete
NAME MCKINNON, JOEL
STREET ADDRESS 701 VIA BELLE
CITY-ST-ZIP WINTER PARK FL 32792 32789

TITLE D ☒ Delete
NAME MCKINNON, GENEAN
STREET ADDRESS 701 VIA BELLE
CITY-ST-ZIP WINTER PARK FL 32792 32789

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME JOEL W. MCKINNON
STREET ADDRESS 701 VIA BELLE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE ☒ Change ☐ Addition
NAME GENEAN MCKINNON
STREET ADDRESS 701 VIA BELLE
CITY-ST-ZIP WINTER PARK, FL 32789

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB 16, 2000 407-830-4484

Date

Daytime Phone #