

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000032040

1. Entity Name

MARCUS & WILLIAMS, INC.

FILED
Jul 28, 2000 8:00 am
Secretary of State

04-25-2000 90095 017 ***150.00

Principal Place of Business

24 CASTLE DR
NOKOMIS FL 34275

Mailing Address

24 CASTLE DR
NOKOMIS FL 34275

2. Principal Place of Business

24 Castle Dr.

3. Mailing Address

24 Castle Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Nokomis FL

City & State

Nokomis FL

4. FEI Number

65-0975099

Applied For

Not Applicable

Zip

34275

Country

USA

Zip

34275

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CAITHNESS, WILLIAM
215 C. RUBENS DR.
NOKOMIS FL 34275

7. Name and Address of New Registered Agent

Name Caithness, William

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

24 Castle Dr.

City Nokomis

FL

Zip Code 34275

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 President, Director ☐ Delete
NAME 24 Castle Dr. William Caithness
STREET ADDRESS Nokomis, FL 34275
CITY-ST-ZIP

TITLE Secretary, Director ☐ Delete
NAME Marilyn S. Caithness
STREET ADDRESS 24 Castle Dr
CITY-ST-ZIP Nokomis, FL 34275

TITLE Director ☐ Delete
NAME Mark I. Caithness
STREET ADDRESS 607 Four Bays Dr.
CITY-ST-ZIP Nokomis, FL 34275

TITLE Director ☐ Delete
NAME William Caithness, Jr.
STREET ADDRESS 225 Nippino Trail
CITY-ST-ZIP Nokomis, FL 34275

TITLE Director ☐ Delete
NAME Lyane A. Brady
STREET ADDRESS 1 Pinewood Lane
CITY-ST-ZIP Groveland, MA 01834

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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NAME
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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:

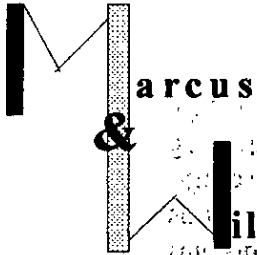
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/20/00

Date

(941) 484-3096

Daytime Phone #



DOC#-P99000032040

18969

Marcus & Williams Inc..
24 Castle Dr.
Nokomis, Florida 34275

Phone: 941-484-3096
Fax: 941-480-1944
Email: CAITHNESS@prodigy.net

VENTURE CAPITAL

Saturday, July 22, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32303-1500

Gentlemen,

Marcus & Williams Inc. filed a 2000 Uniform Business Report in April, 2000. along with a check for \$150.00 (which has been cashed).

I was very surprised to receive another request for the same. I called your office to find out what the problem was, and was informed that the first report was faulty for some reason. I have never received a notification that the first report was faulty. Your office directed me to send in this report and the file fee would remain the original \$150.00.

Thank you for assistance in this matter..

Sincerely,

William Caithness President.