

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000033989

1. Entity Name

WOLVERINE SOUTH, INC.

Principal Place of Business

1625 N. OLD DIXIE HWY.
JUPITER FL 33469

Mailing Address

1625 N. OLD DIXIE HWY.
JUPITER FL 33469

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

59-3568716

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ANDERSON, J. PATRICK
930 S. HARBOR CITY BOULEVARD
SUITE 505
MELBOURNE FL 32901

Name JOHN G. SCHIRLE JR

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

23 STARBOARD WAY

City TEQUESTA

FL

Zip Code 33469

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.

JOHN G. SCHIRLE JR. PRESIDENT

7-14-00

(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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Delete	TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHIRLE, JOHN G JR.	NAME	SCHIRLE, JOHN G. JR.
STREET ADDRESS	49033 FOX DRIVE, NORTH	STREET ADDRESS	23 STARBOARD WAY
CITY-ST-ZIP	PLYMOUTH MI 48170	CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	<input type="checkbox"/> Delete	TITLE	SEC/TRES. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	SCHIRLE, LORI
STREET ADDRESS		STREET ADDRESS	23 STARBOARD WAY
CITY-ST-ZIP		CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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

JOHN G. SCHIRLE JR. PRESIDENT 7-14-00 561-747-0403

Date

Daytime Phone #

FILED
Jul 21, 2000 8:00 am
Secretary of State

07-21-2000 90150 048 ***150.00



DO NOT WRITE IN THIS SPACE

Attachment
DT# P99000033989
DOJ 73003

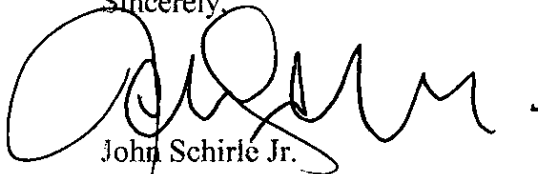
July 14, 2000

Dear Official,

This is my first year of doing business in the State of Florida. This week I received a second notice of the 2000 Uniform Business Report. I can't explain why, but I never received the first one.

As a new business owner, I find the penalty for late filing to be a financial burden and request that you review my situation for a penalty wavier. I am now aware of this required filing and will be looking for it the first of each year. I assure you that I will be timely on all future filings. I thank you in advance for your consideration.

Sincerely,



John Schirle Jr.

President

Wolverine South, Inc.

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Attachment
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