

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000034114

1. Entity Name

CALYPSO BAY TANNING COMPANY, INC.

FILED
Feb 12, 2001 8:00 am
Secretary of State

02-12-2001 90210 034 ***150.00

0428485

Principal Place of Business

989 RIVERSIDE RIDGE RD.
TARPON SPRINGS FL 34689

Mailing Address

989 RIVERSIDE RIDGE RD.
TARPON SPRINGS FL 34689

2. Principal Place of Business

34930 USHWY 19 N

3. Mailing Address

PO Box 1363

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DALM HARBOR FL

City & State

TARPON SPGS FL

Zip

34689

Country

US

Zip

34689-1363

Country

USA

4. FEI Number

59-3569350

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BUNDY, GREG
989 RIVERSIDE RIDGE RD.
TARPON SPRINGS FL 34689

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, 2001 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 PT ☐ Delete
NAME BUNDY, GREG
STREET ADDRESS 989 RIVERSIDE RIDGE RD.
CITY-ST-ZIP TARPON SPRINGS FL 34689

TITLE VS ☐ Delete
NAME BUNDY, MARY
STREET ADDRESS 989 RIVERSIDE RIDGE RD.
CITY-ST-ZIP TARPON SPRINGS FL 34689

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
STREET ADDRESS
CITY-ST-ZIP

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

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

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Greg A. Bundy

2/10/01

Date

(727)

772-6788

Daytime Phone #

CR2E034 (10/00)