

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000034785

1. Entity Name

TUTT'Z PLUMBING, INC.

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

01-28-2000 90204 009 ***150.00

Principal Place of Business

428 ELLIS STREET
NORTH FORT MYERS FL 33903

Mailing Address

428 ELLIS STREET
NORTH FORT MYERS FL 33903-3318

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

P.O. Box 35010

City & State

City & State

No. Ft. Myers, FL

Zip

Country

Zip

Country

33918 Lee

4. FEI Number

65-0911419

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

TUTTLE, KELLY THOMAS
428 ELLIS STREET
NORTH FORT MYERS FL 33903

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 *Kelly Thomas Tuttle*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/15/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME TUTTLE, KELLY THOMAS
STREET ADDRESS 428 ELLIS STREET
CITY-ST-ZIP NORTH FORT MYERS FL 33903

TITLE D ☒ Delete
NAME TUTTLE, ANNA
STREET ADDRESS 428 ELLIS STREET
CITY-ST-ZIP NORTH FORT MYERS FL 33903

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME ~~Secretary V.D.~~
STREET ADDRESS ~~Violet Tuttle Smith~~
CITY-ST-ZIP ~~1500 Flynn Rd~~
~~No. Ft. Myers, FL 33903~~

TITLE ☒ Change ☐ Addition
NAME ~~Secretary V.D.~~
STREET ADDRESS ~~Violet Tuttle Smith~~
CITY-ST-ZIP ~~1500 Flynn Rd~~
~~No. Ft. Myers, FL 33903~~

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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: *Kelly Thomas Tuttle*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/3/00 (941) 997-1717

CR 2034 (9/99)