

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000038090

1. Entity Name

AFFINITY CONTRACT GROUP, INC.

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

04-21-2000 90104 002 ***150.00

Principal Place of Business

Mailing Address

PO BOX 210862
WEST PALM BEACH FL 33421-0862

PO BOX 210862
WEST PALM BEACH FL 33421-0862

2. Principal Place of Business

11150 Okeechobee Blvd.

3. Mailing Address

11150 Okeechobee Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite A

Suite A

City & State

City & State

Royal Palm Beach, FL

Royal Palm Beach, FL

Zip

Country

Zip

Country

33411

Palm Beach

33411

Palm Beach

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARTMAN, MICHAEL C
12331 LACEWOOD LANE
WELLINGTON FL 33414

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

Michael C. Hartman, President Michael C Hartman 4-11-00

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
D	HARTMAN, MICHAEL C	12331 LACEWOOD LANE	WELLINGTON FL 33414	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	HARTMAN, MICHAEL C	11150 OKEECHOBEE BLVD SUITE A	ROYAL PALM BEACH, FL 33411	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 empowers.

SIGNATURE:

Michael C Hartman Michael C Hartman 4/11/00 798-3660

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)