## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # p99000038337 Apr 25, 2000 8:00 am 1. Entity Name Secretary of State JANICE APPEL, INC. 04-25-2000 90039 005 \*\*\*150.00 Principal Place of Business Mailing Address Red Barn Flea Market #22 Janice Lynn Appel 8140 Natures Way # 22 1707 1st Street East Bradenton, Florida 34202 Bradenton, Florida 34208 06074036 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-3578932 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Janice Lynn Appel Wes Smith Street Address (P.O. Box Number is Not Acceptable) 8140 Natures Way # 22 1206 Manatee Avenue West Bradenton, Florida 34205 la Carcon, Micrica 54204 7ip,Code 34202 Bradenton 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. FILE NOW!!! FEE IS \$150.00 9. This corporation is éligible to satisfy its intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. TITLE [ Change Addition ☐ Delete TITLE Janice Lynn Appel NAME NAME 8140 Natures Way STREET ADDRESS STREET ADDRESS Bradenton, Florida 34202 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete Alan George Weger NAME STREET ADDRESS STREET ADDRESS 8140 Natures Way CITY-ST-7IP CITY-ST-ZIP Bradenton, Florida 34202 ☐ Addition JULE. TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ Delete TITLE TITLE 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.

Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR