

2000 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED

May 30, 2000 8:00 am
Secretary of State

05-01-2000 90383 042 ***150.00

DOCUMENT # P99000040694

1. Entity Name

SUTTON'S VENDING, INC.

Principal Place of Business

Mailing Address

**1320 DIXIE LANE SOUTH
ST. PETERSBURG FL 33707**

**1320 DIXIE LANE SOUTH
ST. PETERSBURG FL 33707-3914**

2. Principal Place of Business

3524 53rd St. N.

Suite, Apt. #, etc.

3. Mailing Address

3524 53rd St. N.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

St. Pete, Fla. 33710

City & State

St. Pete Fla. 33710

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SCHULZ, WILLIAM A II
1320 DIXIE LANE SOUTH
ST. PETERSBURG FL 33707**

7. Name and Address of New Registered Agent

Name **Donald Boon Sutton**

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

3524 53rd St. N.

City **St. Pete, Fla.**

FL

Zip Code **33710**

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

Donald Sutton

Signature, typed or printed name of registered agent and title if applicable.

Donald Sutton

(NOTE: Registered Agent signature required when reinstating)

5/21/00

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 **Sole Officer** ☐ Delete
NAME **Donald Sutton**
STREET ADDRESS **3524 53rd St. North**
CITY-ST-ZIP **St. Pete, Fla. 33710**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
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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
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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 the empowered.

SIGNATURE:

Donald Sutton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/00

Date

727-528-1477

Daytime Phone #

CR2E034 (9/99)