

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000041851

1. Entity Name

BILLY-BOBS SMALL ENGINE SALES & SERVICE, INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90124 014 ***150.00

Principal Place of Business

Mailing Address

3965 10TH AVE SE

3965 10TH AVE SE

NAPLES FL 34117

NAPLES FL 34117-9153

1832 40th Terrace S.W.

1832 40th Terrace S.W.

Naples, FL 34116

Naples, FL 34116

2. Principal Place of Business

3. Mailing Address

1832 40th Terrace S.W.

1832 40th Terrace S.W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Naples FL

Zip

34116

Country

USA

City & State

Naples FL

Zip

34116

Country

USA

4. FEI Number

59-3585197

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

BLANTON, LONNIE C
3965 10TH AVE, SE
NAPLES FL 34117

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, 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	<input type="checkbox"/> Delete
NAME	BURKE, MARY E	
STREET ADDRESS	2007 MAISON HALL, KENTON ROAD	
CITY-ST-ZIP	KENTON TN 38233-4045	
TITLE	P.I.D.	<input type="checkbox"/> Delete
NAME	Lonnie Blanton	
STREET ADDRESS	3965 10th AVE SE.	
CITY-ST-ZIP	Naples, FL 34117	
TITLE	S.I.D.	<input type="checkbox"/> Delete
NAME	Connie Blanton	
STREET ADDRESS	3965 10th AVE SE	
CITY-ST-ZIP	Naples, FL 34117	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Lonnie C Blanton
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-2000
Date

941-455-4195
Daytime Phone #

CR2E034 (9/99)