## 2000 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or trustee one changed, or on an attachment with an address.

SIGNATURE:

other like empowered.

YPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # P99000046635 May 26, 2000 8:00 am Secretary of State BILLY G'Z DOWNTOWN, INC. 05-26-2000 90077 021 \*\*\*150.00 Mailing Address Principal Place of Business 118 HUNTINGTON DRIVE 118 HUNTINGTON DRIVE LARGO FL 33755-4103 LARGO FL 33771 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LYONS, GARY W Street Address (P.O. Box Number is Not Acceptable) 311 SOUTH MISSOURI AVENUE **CLEARWATER FL 33756** Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE **GUARINO, WILLIAM T** NAME STREET ADDRESS STREET ADDRESS 118 HUNTINGTON DRIVE CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME GUARINO, GARY R NAME STREET ADDRESS STREET ADDRESS 118 HUNTINGTON DRIVE CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 ☐ Change Addition TITLE Delete TITLE GUARINO, JOHN FRANK JR NAME NAME STREET ADDRESS STREET ADDRESS 118 HUNTINGTON DRIVE CITY-ST-ZIP CITY-ST-ZIP LARGO FL 33771 ☐ Change ☐ Addition ☐ Delete TITLE NAME MAGUIRE, JAMES NAME STREET ADDRESS STREET ADDRESS **601 CLEVELAND STREET** CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33755** ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition 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 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 and the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee and the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee and that my name appears in Block 11 or Block 12 if