

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000047861

1. Entity Name  
CORDA-ROY'S ORIGINALS, INC.

**FILED**  
**Jul 13, 2000 8:00 am**  
**Secretary of State**

07-13-2000 90019 028 \*\*\*150.00

Principal Place of Business  
3709 NW 21 DR.  
GAINESVILLE FL 32605

Mailing Address  
3709 NW 21 DR.  
GAINESVILLE FL 32605

2. Principal Place of Business  
5000 NW 34th ST #12

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
GAINESVILLE, FL

City & State

4. FEI Number  
59-3610488

Applied For  
Not Applicable

Zip  
32605

Country  
USA

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

YOUNG, ROBERT B  
3709 NW 21 DR.  
GAINESVILLE FL 32605

SEE CHANGE  
BELOW

## 7. Name and Address of New Registered Agent

Name  
RICHARD B. YOUNG  
Street Address (P.O. Box Number is Not Acceptable)  
3709 NW 21 DR  
GAINESVILLE, FL 32605  
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 \_\_\_\_\_ (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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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  
OWNER ☒ Delete  
NAME  
ROBERT B. YOUNG  
STREET ADDRESS  
3709 NW 21 DR  
CITY-ST-ZIP  
GAINESVILLE, FL 32605

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
OWNER ☐ Change ☒ Addition  
NAME  
RICHARD B. YOUNG  
STREET ADDRESS  
5000 NW 34th ST (#12)  
CITY-ST-ZIP  
GAINESVILLE, FL 32605

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

attachment Doc # P99000047861

B0102802

This letter is in reference to the Uniform Business Report that is enclosed. The report was obviously sent to the home of the owner instead of to the business address and was somehow never received. Please make the necessary changes to the report and accept this check for \$150.00. The amount was calculated by Tyrone at the customer service department. Thank you, Byron Young