

2001 UNIFORM BUSINESS REPORT (ÜBR)

FILED

Feb 13, 2001 8:00 am
Secretary of State

02-13-2001 90566 032 ***150.00

DOCUMENT # P99000051203

1. Entity Name
FOUNDRY PRODUCTS, INC.

Principal Place of Business

6104-31ST STREET EAST
BRADENTON FL 34203

Mailing Address

6104-31ST STREET EAST
BRADENTON FL 34203

2. Principal Place of Business

6005-A 17th St E

3. Mailing Address

6005-A 17th Street East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bradenton, Florida

City & State

Bradenton, FL

Zip

34203

Country

MAINE

Zip

34203

Country

MAINE

4. FEI Number

65-0960179

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLALOCK LANDERS WALTERS & VOGLER PA
802-11TH STREET WEST
BRADENTON FL 34205

Name

J. Wesley Palmer

Street Address (City Number is not Acceptable)

6005-A 17th Street EAST

BRADENTON, FLORIDA

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

J. Wesley Palmer - PRES

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

(NOTE: Registered Agent signature when reinstating)

DATE

1/12/01

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	PST PALMER, J. WESLEY 6104-31ST STREET EAST BRADENTON FL 34203	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

J. Wesley Palmer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/12/01 (941) 753-1881

CR2E034 (10/00)