

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000053963

1. Entity Name

DEBRA BRUNNER, INC.

Principal Place of Business

5211 LADY ROSE COURT  
LUTZ FL 33549

Mailing Address

5211 LADY ROSE COURT  
LUTZ FL 33549

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip \_\_\_\_\_ Country \_\_\_\_\_

Zip \_\_\_\_\_ Country \_\_\_\_\_

4. FEI Number

59-3578541

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BRUNNER, DEBRA  
5211 LADY ROSE CT  
LUTZ FL 33549

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, 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 D  
NAME BRUNNER, DEBRA  
STREET ADDRESS 12555 WINNERS CIRCLE  
CITY-ST-ZIP SPRING HILL FL 34610

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

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: *Debra Brunner* Debra Brunner 4-30-01 813-920-7360  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

035683

FILED  
May 21, 2001 8:00 am  
Secretary of State

05-21-2001 90370 046 \*\*\*150.00

769405



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)