2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT & DOCOCOCE 4607)	FILED				
DOCUMENT # P9900054687 1. Entity Name FREEDOM PALLETS, INC.							Jun 01, 2000 8:00 am Secretary of State				
FREEDO	NVI PALLET	o, inc.						000 90023 0			
Principal Plac	e of Business	<u> </u>	Mailing Address								
4510 PROSPERITY DRIVE FT PIERCE FL 34981		4510 PROSPERITY DRIVE FT PIERCE FL 34991-4735									
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_	DO NOT WRI	ITE IN THIS SPA	CE			
City & State		City & State			4. F	El Number (25-0/29	4850		plied For t Applicable		
Zip		Country	Zip .	Count	ry	5. (Certificate of Status Desired	□ \$8	75 Add Required	litional	
	6. Name a	nd Address of Current F	egistered Agent		Name	7. 1	lame and Address of New I	Registered Age	nt		
	VEY, JACK C					ress (P.O. B	ox Number is Not Acceptabl	e)			
FT P	IERCE FL 34	981									
					City			FL	Zip Code)	
Tax filing	Signature, typed or oration is eligible	printed name of registered agent as e to satisfy its Intangible d elects to do so.		V!!! FEE I 2000 Fee v		.00	10. Election Campaign Fi Trust Fund Contribution			O May Be to Fees	
11.	1.65	OFFICERS AND I		12,		AD	DITIONS/CHANGES TO OF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MULVEY, S 4510 PROS FT PIERCE	PERITY DRIVE	☐ Delete		j				Change	Addition 8	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD KLEINFELTI	er, gregory m Perity drive	Delete						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-2IP	STD PROXMIRE,	CLAYTON E PERITY DRIVE	Delete	TITLE NAME STREE					Change	Addition	
O111-01-E1	SECRE TA	Ry L	☐ Delete	TITLE	n	ecrota nulver	JACK C.		Change 7	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mulvey 4510 Pe	Specify DR.		STREE	T ADDRESS 🎝	1510 PA	ospereity DK.	•			
TITLE NAME STREET ADDRESS	Mulvey 4510 Pe	STACK C. OSPORITY DR.	☐ Delete	STREE CITY- TITLE NAME STREE	ST-ZIP	1510 PA	ospereity DK.		Change	Addition	

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 at 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 changed, or on an attachment with an address, with all other like empowered.

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SIGNATURE)