

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000056276

1. Entity Name

HAVE A NICE LIFE, INC.

FILED

May 15, 2000 8:00 am
Secretary of State

05-15-2000 90268 044 ***150.00

Principal Place of Business

Mailing Address

2464 RANCH ACRE CIRCLE
JUPITER FL 33478

2464 RANCH ACRE CIRCLE
JUPITER FL 33478-1901

2. Principal Place of Business

116 NW 13th Street

3. Mailing Address

116 NW 13th Street

Suite, Apt. #, etc.

Suite 195

Suite, Apt. #, etc.

Suite 195

City & State

Gainesville, FL

City & State

Gainesville, FL

4. FEI Number

65-0929274

Applied For

Not Applicable

Zip

32601

Country

US

Zip

32601

Country

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

Lance Kotcher

Street Address (P.O. Box Number is Not Acceptable)

116 NW 13th Street

Suite 195

City

Gainesville, FL

FL

Zip Code

32601

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

Lance Kotcher

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, 2000 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
PSTD
KOTCHER, LANCE M
2464 RANCH ACRE CIRCLE
JUPITER FL 33478 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

Lance Kotcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)