

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000057257

1. Entity Name
SUMMER RAYS RENTAL, INC.

Principal Place of Business
1725 MAIN ST
FT MYERS BEACH FL 33931

Mailing Address
PO BOX 6512
FT MYERS BEACH FL 33931

2. Principal Place of Business
64 OYSTER BAY LANE
Suite, Apt. #, etc.

3. Mailing Address
64 OYSTER BAY LANE
Suite, Apt. #, etc.

City & State
FORT MYERS BEACH, FLORIDA
Zip 33931 Country

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FORT MYERS BEACH, FLORIDA
Zip 33931 Country

4. FEI Number 65-0930186 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
RAY, JANE M
1725 MAIN ST
FT MYERS BEACH FL 33931

7. Name and Address of New Registered Agent
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 \$550.00
After September 12, 2001 Fee 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT RAY, JANE M PO BOX 6512 FT MYERS BEACH FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT RAY, JANE M 64 OYSTER BAY LANE FT. MYERS BEACH, FL. 33931 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RAY, PETER D PO BOX 6512 FT MYERS BEACH FL 33931 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RAY, PETER D 64 OYSTER BAY LANE FT. MYERS BEACH, FL. 33931 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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: *[Signature]* SIGNATURE RECD PRESIDENT 9/10/2001 941-463-0714
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Sep 18, 2001 8:00 am
Secretary of State

09-18-2001 90001 013 ***150.00



DO NOT WRITE IN THIS SPACE

0124561 AT

CR2E034 (5/01)

ACCOUNTING FIRM OF
SMITH, SMITH & ASSOCIATES, INC.

137 PLACID DR
FT. MYERS, FL. 33919

PHONE (941) 482-3573
FAX

(941) 482-8495

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

Attachment
P99000057257
979288

09/15/2001

RE: SUMMER RAYS RENTAL, INC. DOCUMENT # P99000057257

DEAR SIR/MADAM

ENCLOSED YOU WILL FIND A CHECK FOR \$ 150.00 THE FEE FOR CORPORATION BUSINESS REPORT, I HAVE ALSO ENCLOSED A COPY OF THE U.S. MAIL NEW ADDRESS LABEL, IN AS MUCH AS THIS TAXPAYER NEVER RECEIVED THEIR FIRST NOTICE AND JUST NOW RECEIVED THIS NOTICE WE ASK THAT YOU REMOVE THE PENALTY AND EXCEPT THIS REPORT AND THE FEE.

VERY TRULY YOURS,

Larry J. Smith

LARRY J. SMITH
ACCOUNTANT