

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000057570

1. Entity Name

APPLE INSPIRATIONS, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90804 011 ***150.00

Principal Place of Business

Mailing Address

5510 19TH ST.
 ZEPHYRHILLS FL 33540

5510 19TH ST.
 ZEPHYRHILLS FL 33540-4599

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

35614 Welby Ct.

35614 Welby Ct.

City & State

City & State

Zephyrhills, FL

Zephyrhills, FL

Zip

Country

Zip

Country

33541

U.S.A.

33541

U.S.A.

4. FEI Number

Applied For

☒ Not Applicable

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

HOLLYFIELD, WENDY
 5510 19TH ST.
 ZEPHYRHILLS FL 33540

Name

Wendy Hollyfield

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

35614 Welby Ct.

City

Zephyrhills

FL

Zip Code

33541

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 Wendy Hollyfield (Wendy Hollyfield)

(NOTE: Registered Agent signature required when reinstating)

4/26/00

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 President ☐ Delete
 NAME Michelle Travis
 STREET ADDRESS 37650 Geiger Rd.
 CITY-ST-ZIP Zephyrhills FL 33541

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

TITLE Vice-President ☐ Delete
 NAME Wendy Hollyfield
 STREET ADDRESS 35614 Welby Ct.
 CITY-ST-ZIP Zephyrhills, FL 33541

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

TITLE Secretary ☐ Delete
 NAME Deanna Garrett
 STREET ADDRESS 13908 3rd St.
 CITY-ST-ZIP Dade City, FL 33525

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

TITLE Treasurer ☐ Delete
 NAME Carrie Dumar
 STREET ADDRESS 5415 Lisa Circle
 CITY-ST-ZIP Zephyrhills, FL 33541-3387

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

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

TITLE ☐ Delete
 NAME ☐ Delete
 STREET ADDRESS ☐ Delete
 CITY-ST-ZIP ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
 STREET ADDRESS ☐ Change ☐ Addition
 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:

Michelle Travis
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/26/00

Daytime Phone #

813-783-1182

CR2E034 (9/99)