

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000062417

1. Entity Name

MOONLIGHT BAY, INC.

FILED

Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90043 046 ***150.00

Principal Place of Business

12371 N.W. 27TH PLACE
CORAL SPRINGS FL 33065

Mailing Address

12371 N.W. 27TH PLACE
CORAL SPRINGS FL 33065-8004

2. Principal Place of Business

4528 N. University Dr.
Suite, Apt. #, etc.

3. Mailing Address

4528 N. University Dr.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Lauderhill, FL

City & State

Lauderhill, FL

4. FEI Number

65-0934797

Applied For
Not Applicable

Zip

33351

Country

U.S.A.

Zip

33351

Country

U.S.A.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CRAMMER, EDWIN L CPA
7481 W. OAKLAND PARK BLVD. #102
LAUDERHILL FL 33319

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 \$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

TITLE PD ☐ Delete

NAME LEONARD, LARRY
STREET ADDRESS 12371 N.W. 27TH PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE VPD ☒ Delete

NAME LEONARD, DAVID
STREET ADDRESS 12371 N.W. 27TH PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE SD ☐ Delete

NAME LEONARD, DENISE
STREET ADDRESS 12371 N.W. 27TH PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Pres / Sec. ☒ Change ☐ Add

NAME Leonard, Larry
STREET ADDRESS 4528 N. University Dr.
CITY-ST-ZIP Laudershill, FL 33351

TITLE ☐ Change ☐ Add

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Vice Pres / Treas. ☒ Change ☐ Add

NAME Leonard, Denise
STREET ADDRESS 4528 N. University Dr.
CITY-ST-ZIP Laudershill, FL 33351

TITLE ☐ Change ☐ Add

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Add

NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

Denise Leonard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/00

Date

954-741-142

Daytime Phone #