

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000063668

1. Entity Name J.B. ALVA INC.

FILED
Jul 26, 2000 8:00 am
Secretary of State

06-20-2000 90006 029 ***150.00

Principal Place of Business
19971 S. RIVER RD
ALVA, FL 33920

Mailing Address
4841 WADY CROSS RD,
FT. MYERS, FL
33905

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0940297

Applied For

Not Applicable

Zip

Country

Zip

Country

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

JERRY BAUMGARTNER
19971 S. RIVER RD.
ALVA, FL 33920

Name JERRY BAUMGARTNER
Street Address (P.O. Box Number is Not Acceptable)
19971 S. RIVER ROAD
City ALVA FL Zip Code 33920

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 JERRY L. BAUMGARTNER President Date 6/15/2000
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$500.00
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
NAME JUDITH BUNK
STREET ADDRESS 19971 S. RIVER ROAD
CITY-ST-ZIP ALVA, FL 33920 ☒ Delete

TITLE PRESIDENT
NAME JERRY L. BAUMGARTNER
STREET ADDRESS 19971 S. RIVER ROAD
CITY-ST-ZIP ALVA, FL 33920 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

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

TITLE ☐ Change ☐ Addition
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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY L. BAUMGARTNER President Date 6/15/2000 Daytime Phone # 694-5289
Signature and typed or printed name of signing officer or director

CR2004 (9/99)