

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 18, 2001 8:00 am
Secretary of State

05-18-2001 91588 046 ***150.00

DOCUMENT # **99000063697**
1. Entity Name
R+R Underhill Enterprises, Inc.

Principal Place of Business Mailing Address
8120 Alveron Ave 8120 Alveron Ave
Orlando, FL 32817 Orlando, FL 32817

A0070405

2. Principal Place of Business 3. Mailing Address
8120 Alveron Ave 8120 Alveron Ave
Suite, Apt. #, etc. Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State City & State 4. FEI Number Applied For
Orlando Florida Orlando Florida 59-3578510 Not Applicable
Zip Country Zip Country 5. Certificate of Status Desired ☐ \$8.75 Additional
32817 USA 32817 USA Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Underhill, Roberta M
8120 Alveron Ave
Orlando, Florida 32817

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 _____ DATE _____
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, 2001, 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	UNDERHILL, ROBERTA M ☐ Delete 8120 Alveron Ave Orlando, FL 32817	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	UNDERHILL, ROGER E ☐ Delete 8120 Alveron Ave Orlando, FL 32817	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME 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)(f), 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 **Roberta Underhill/Roberta Underhill** 4/25/01 (407) 679-1813
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)