

2001 UNIFORM BUSINESS REPORT (UBR)

4/2

FILED
May 21, 2001 8:00 am
Secretary of State

04-20-2001 90161 007 ***150.00

DOCUMENT # P99000070431

1. Entity Name

LE ROOSTER'S BREW, INC.

Principal Place of Business

311 HAVENDALE BLVD
 STE 297
 AUBURNDALE FL 33823

Mailing Address

1403 CROOKEDSTICK LOOP
 LAKELAND FL 33801

2. Principal Place of Business

1403 CROOKEDSTICK LOOP
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

LAKELAND, FL

City & State

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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3592796

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, DIANE E ESQ
 2012 S FLORIDA AVE
 LAKELAND FL 33808

7. Name and Address of New Registered Agent

Name CAROL L. ALVAREZ

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

1403 CROOKEDSTICK LOOP

City LAKELAND

FL

Zip Code 33801

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 Carol L. Alvarez

(NOTE: Registered Agent signature required when reinstating)

4/16/01

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

TITLE	D	<input type="checkbox"/> Delete
NAME	SUTTON, DON	
STREET ADDRESS	1403 CROOKEDSTICK LOOP	
CITY-ST-ZIP	LAKELAND FL 33801	
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Don Sutton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)