## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED DOCUMENT # P99000072120 Jul 26, 2000 8:00 am 1. Entity Name **Secretary of State** JAKES OF NAPLES, INC. 07-26-2000 90009 013 \*\*\*150.00 Mailing Address Principal Place of Business 2495 LINWOOD AVE. 2495 LINWOOD AVE. NAPLES FL 34112 NAPLES FL 34112 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FFi Number City & State City & State Not Applicable 65-0957061 Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent FINANCIAL FOUNDATIONS, INC. Street Address (P.O. Box Number is Not Acceptable) 3150 SANDY RIDGE DR. CLEARWATER FL 33761 Zip Code City 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) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Change ☐ Addition TITLE Delete CONLEY, GEORGE J NAME NAME STREET ADDRESS STREET ADDRESS 2495 LINWOOD AVE. CITY-ST-ZIP CITY-ST-7IP NAPLES FL 34112 ☐ Change ☐X Addition VP ☐ Delete TITLE NAME William D. Haines STREET ADDRESS STREET ADDRESS 3087 Lunar Street CITY-ST-ZIP CITY-ST-ZIP Naples FL 34112 Change Addition ☐ Delete TITLE s/T MALAE -Debra Hardwick STREET ADDRESS STREET ADDRESS 991 13th Street CITY-ST-ZIP CITY-ST-ZIP Naples FL 34102 ☐ Addition TITLE Change TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

SIGNATURE REQUIRED

George of Conley

441-572-0451

Daytime Phone #

Jakes of Naples, Inc. 2495 Linwood Ave. Naples, FL 34112



July 18, 2000

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Jakes of Naples, Inc. 65-0957061

Dear Sir or Madam:

Enclosed is my company's 2000 Uniform Business Report. Also enclosed is the company's check for \$150.00. I respectfully request that you accept the enclosed check as payment in full because I never received your first notice. As we have only recently become a corporation I am inexperienced with regards to all of the filing requirements of a corporation and is the reason I did not realize we should have received the original form in the first place.

I am now aware of the importance of the filing of the Annual Reports and assure you this error will not occur again. Thank you for your consideration.

Sincerely,

George J. Conley

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George of Conley