2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P99000075862 Feb 04, 2000 8:00 am Secretary of State INDIAN RIVER LOADER SERVICE, INC. 02-04-2000 90052 043 ***150.00 Principal Place of Business Mailing Address 8801 INDRIO RD RROLLINDRIO RD FT PIERCE FL 34951-1615 FT PIERCE FL 34951 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number 65-0942281 Applied For City & State City & State Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RUSSAKIS, NICHOLAS J Street Address (P.O. Box Number is Not Acceptable) 8801 INDRIO RD FT PIERCE FL 34951 Zip Code Fl 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 12. 11. TITLE Change ☐ Addition Delete TITLE RUSSAKIS, NICHOLAS J NAME 8801 INDRIO RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL 34951 TITLE ☐ Change ☐ Addition ☐ Delete TITI F NOELKE, JOSEPH H JR NAME NAME STREET ADDRESS 8801 INDRIO RD STREET ADDRESS CITY-ST-7IP FT PIERCE FL 34951 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NOELKE, DENNIS J NAME NAME 8801 INDRIO RD STREET ADDRESS STREET ADDRESS FT PIERCE FL 34951 CITY-ST-ZIP CITY-ST-7IP □ Change ☐ Addition Delete TITLE RUSSAKIS, JIM G NAME NAME 8801 INDRIO RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FT PIERCE FL 34951 CITY-ST-ZIP Addition Change | Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 employered 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.