

2001 UNIFORM BUSINESS REPORT (UBR)

1/13/01-5

FILED

Feb 08, 2001 8:00 am
Secretary of State

01-13-2001 90062 019 ***150.00

DOCUMENT # P99000076680

1. Entity Name
WORKBENCH INC.

Principal Place of Business
417 9TH AVE. WEST
PALMETTO FL 34221

Mailing Address
417 9TH AVE. WEST
PALMETTO FL 34221

2. Principal Place of Business
2114 1st Street W.
Suite, Apt. #, etc.

3. Mailing Address
2114 1st Street W.
Suite, Apt. #, etc.

City & State
Bradenton, FL
Zip
34205
Country
USA

City & State
Bradenton, FL
Zip
34205
Country

4. FEI Number 65-0942061

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SYNDER, JOSEPH
417 9TH AVE. WEST
PALMETTO FL 34221

7. Name and Address of New Registered Agent

Name SYNDER, Joseph
Street Address (P.O. Box Number is Not Acceptable)
1500 Pine Prairie Rd.
City Sarasota, FL Zip Code 34240

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 Joseph A. Smyth

(NOTE: Registered Agent signature required when reinstating)

01-06-2K1

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	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
	SYNDER, JOSEPH	417 9TH AVE. WEST	PALMETTO FL 34221	<input type="checkbox"/>
		1500 Pine Prairie	Sarasota, FL 34240	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Joseph A. Smyth

01-25-2001

Date

Daytime Phone #

CR2E034 (10/00)