

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000078810

1. Entity Name

FOAM CUTTERS AND SUPPLIES, INC.

FILED
May 31, 2000 8:00 am
Secretary of State

05-31-2000 90049 020 ***150.00

Principal Place of Business

4701 N.E. 36TH AVE.
OCALA FL 34479

Mailing Address

P.O. BOX 608
OCALA FL 34478-0608

2. Principal Place of Business

3650 NE 36th Avenue

3. Mailing Address

Suite, Apt. #, etc.

City & State

Ocala, FL

City & State

Zip
34479

Country
Marion

Zip

Country

4. FEI Number

59-3597320

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SUMNER, SCOTT
4701 N.E. 36TH AVE.
OCALA FL 34479

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

Scott Sumner

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2000 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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

Director
Scott Sumner
4701 NE 36th Avenue
Ocala FL 34479

TITLE ☐ Change ☐ Addition

Director
Kathy Sumner
4701 NE 36th Avenue
Ocala FL 34479

TITLE ☐ Change ☐ Addition

Director
John Dann
2609 NE 14th Street
Ocala FL 34470

TITLE ☐ Change ☐ Addition

Director
Fran Dann
2609 NE 14th Street
Ocala FL 34470

TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
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: Scott Sumner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

352-867-8850

Daytime Phone #

CR2E034 (9/99)