

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000082213

(R)

1. Entity Name  
BACK COUNTRY COLLECTIONS, Inc

**FILED**  
**Aug 15, 2000 8:00 am**  
**Secretary of State**

08-15-2000 90019 007 \*\*\*150.00

**A0072752**

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
1411 DAVIS DR  
Ft Myers FL 33919

Mailing Address  
1411 DAVIS DR.  
Ft. Myers FL  
33919

2. Principal Place of Business  
6284 MARK LANE

3. Mailing Address  
6284 MARK LANE

City & State  
Fort Myers Florida

City & State  
Fort Myers Florida

Zip  
33912

Country  
Lee

Zip  
33912

Country  
Lee

4. FEI Number  
65-0953927

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

SUSAN M DUNAWAY  
1411 DAVIS Drive  
Fort Myers FL 33919

## 7. Name and Address of New Registered Agent

Name  
CAROLE BEACH

Street Address (P.O. Box Number is Not Acceptable)  
6284 MARK LANE

City  
Fort Myers

FL

Zip Code  
33912

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 *Carole S Beach*  
Signature, typed or printed name of registered agent and title if applicable.

8-9-00  
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

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

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SUSAN M DUNAWAY
STREET ADDRESS	1411 DAVIS Drive
CITY-ST-ZIP	Fort Myers FL 33919
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CAROLE BEACH
STREET ADDRESS	6284 MARK LANE
CITY-ST-ZIP	Fort Myers FL 33912
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: *Susan Dunaway*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-9-00  
Date

941-768-5475  
Daytime Phone #

CR2E034 (9/99)

HHACHNER H  
Doc #: P991000082213  
A0072752

August 9, 2000

081500

1411 Davis Drive  
Fort Myers, Florida 33919

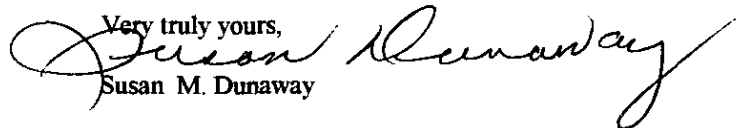
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Attn: Y. Fisher

Per your conversation with Becky Fellows of Back Country Collections on July 24, 2000, please find enclosed a check for \$150.00 to cover the filing fees for Back Country Collections. As Becky explained to you, I did not receive any notices from Tallahassee that the report was due May 1, 2000. If I had received same I certainly would have filed it by the due date.

I apologize for any inconvenience this may have caused you and appreciate the opportunity to file the report. If you require anything further from me, please do not hesitate to contact me.

Very truly yours,

  
Susan M. Dunaway

SMD/  
Encls.

CPA 201e  
265-06-0108

Attachment  
Doc # P99000082213  
A0072752  
081500

SUE DUNNAWAY  
1411 DAVIS DR  
FT MYERS, FL 33919

Ph # 277-9729

Request taken by: yfisher  
07-24-2000

The forms you recently requested from this office are:

- (1) 201. COR Profit A/R

Should you have any questions or need any further information,  
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314