

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000085258

1. Entity Name

STEPHENSON GAS NO. 15, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90141 011 ***150.00

Principal Place of Business

Mailing Address

341 NW 153RD LANE
PEMBROKE PINES FL 33308

341 NW 153RD LANE
PEMBROKE PINES FL 33028-1825

2. Principal Place of Business

4770 N.W. 17th Ave.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

4. FEI Number

65-0949821

Applied For

Not Applicable

Zip

33142

Country

1

Zip

Country

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

STEPHENSON, KEVIN C
341 NW 153RD LANE
PEMBROKE PINES FL 33308

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

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
					President	Kevin C. Stephenson	341 NW 153rd Lane	Pembroke Pines, FL 33028		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:

Kevin Stephenson

Date

4/26/00

Daytime Phone #

(954) 438-7482

CR2E034 (9/99)