

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000086477

1. Entity Name

GLEASON'S STEAK HOUSE OF JUPITER, INC. ✓

FILED
Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90009 022 ***150.00

Principal Place of Business

3944 FLORIDA BLVD.
PALM BEACH GARDENS FL 33410

Mailing Address

3944 FLORIDA BLVD.
PALM BEACH GARDENS FL 33410-2214

2. Principal Place of Business

6791 W. Indiantown Rd
Suite, Apt. #, etc.

3. Mailing Address

6791 W. Indiantown Rd
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
Jupiter FL

Zip
33458

Country

City & State
Jupiter FL

Zip
33458

Country

4. FEI Number

65 0952796

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

COURNOYER, STEPHEN
3944 FLORIDA BLVD.
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name

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

2330 Country Oaks Lane

City

Palm Beach Gardens

FL

Zip Code

33410

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

Stephen Cournoyer
Signature, typed or printed name of registered agent applicable.

President

4/30/00

(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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
COURNOYER, STEPHEN
3944 FLORIDA BLVD.
PALM BEACH GARDENS FL 33410 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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CITY - ST - ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
2330 Country Oaks Lane

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY - ST - ZIP
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CITY - ST - ZIP
☐ Change ☐ Addition

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:

Stephen Cournoyer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00

Date

Daytime Phone #