

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2002 8:00 am
Secretary of State

04-02-2002 90072 005 ***150.00

DOCUMENT # P99000089133

1. Entity Name
PPB ENTERPRISES, INC.

Principal Place of Business
6725 NORTHLAKE DRIVE
ZEPHYRHILLS FL 33541

Mailing Address
6725 NORTHLAKE DRIVE
ZEPHYRHILLS FL 33541



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3603323

Applied For

Not Applicable

Zip

Country

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

BURGESS, KENNETH M JR.
6725 NORTHLAKE DRIVE
ZEPHYRHILLS FL 33541

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, 2002 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	PD	<input type="checkbox"/> Delete
NAME	BURGESS, KENNETH M JR.	
STREET ADDRESS	6725 NORTHLAKE DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	VD	<input type="checkbox"/> Delete
NAME	OGILBEE, WILLIAM R	
STREET ADDRESS	7558 BRIER CLIFF CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	OGILBEE, LISA M	
STREET ADDRESS	7558 BRIER CLIFF CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	S	<input type="checkbox"/> Delete
NAME	BURGESS, VICKI L	
STREET ADDRESS	6725 NORTHLAKE DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
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"/> Change <input type="checkbox"/> Addition
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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: **KENNETH M. BURGESS, JR.**

3-23-02

(813) 782-1949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)