

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90021 006 ***150.00

DOCUMENT # P990000 89171

1. Entity Name

Premier Equity Financial, Inc. ✓

Principal Place of Business

7041 Grand National Drive
Ste 106
Orlando, FL 32819

Mailing Address

7041 Grand National Drive
Ste 106
Orlando, FL 32819.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-360 3258

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Campbell, Timothy F.
4740 Cleveland Heights Blvd.
Lakeland, FL 33813

7. Name and Address of New Registered Agent

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

TITLE: President
NAME: Gilman, Charles A.
STREET ADDRESS: 13726 Vista Del Lago Blvd.
CITY-ST-ZIP: Clermont FL 34711 ☐ Delete

TITLE: Vice President
NAME: Gilman, Charles A.
STREET ADDRESS: 13726 Vista Del Lago Blvd.
CITY-ST-ZIP: Clermont FL 34711 ☐ Delete

TITLE: Treasurer
NAME: Gilman, Charles A.
STREET ADDRESS: 13726 Vista Del Lago Blvd.
CITY-ST-ZIP: Clermont FL 34711 ☐ Delete

TITLE: Secretary
NAME: Gilman, Charles A.
STREET ADDRESS: 13726 Vista Del Lago Blvd.
CITY-ST-ZIP: Clermont FL 34711 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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TITLE: ☐ Change ☐ Addition
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STREET ADDRESS: ☐ Change ☐ Addition
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:

Charles Gilman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/16/00

Date

863-426-2730

Daytime Phone #

CR2E034 (9/99)