

2000 UNIFORM BUSINESS REPORT (UBR)

5/

FILED

Jun 08, 2000 8:00 am
Secretary of State

DOCUMENT # P99000089490

1. Entity Name

FERNLEY, INC.

Principal Place of Business

341 EDSON DRIVE
ORANGE PARK FL 32073

Mailing Address

341 EDSON DRIVE
ORANGE PARK FL 32073-3303

2. Principal Place of Business

1541 Wild Iris Ln
Suite, Apt. #, etc.

City & State

Orange Park, FL

Zip

32073-7071

Country

USA

3. Mailing Address

1541 Wild Iris Ln
Suite, Apt. #, etc.

City & State

Orange Park, FL

Zip

32073-7071

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

593629637

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENTON, FERNLEY M

341 EDSON DRIVE

ORANGE PARK FL 32073 - 7071

1541 Wild Iris Ln

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]

Fernley Benton

4/28/00

(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	S	Delete
NAME	BENTON, WILLIAM R	
STREET ADDRESS	341 EDSON DRIVE	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE	DPT	Delete
NAME	BENTON, FERNLEY M	
STREET ADDRESS	341 EDSON DRIVE	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Change	Addition
NAME		
STREET ADDRESS	1541 Wild Iris Ln.	
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS	1541 Wild Iris Ln.	
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Change	Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Change	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 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-00

874-1103

Date

Daytime Phone #

CR2E034 (9/99)