

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000094216

1. Entity Name

PRAVANA PRODUCTIONS, INCORPORATED

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90350 041 ***158.75

Principal Place of Business

Mailing Address

5300 SOUTH FLORIDA AVENUE
 LAKELAND FL 33813

C/O WENDEL CHRITTON
 POST OFFICE BOX 5378
 LAKELAND FL 33807-5378

2. Principal Place of Business

1421 East Main Street

3. Mailing Address

P.O. Box 532

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland, FL 33801

City & State

Lakeland, FL 33802

4. FEI Number

59-3605140

Applied For

Not Applicable

Zip

33801

Country

U.S.

Zip

33802

Country

U.S.

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

WENDEL, JOHN F
 5300 SOUTH FLORIDA AVENUE
 LAKELAND FL 33813

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	PSD D. Walter Billingsley 1421 East Main Street Lakeland, FL 33801	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD Robert A. Marquart 1421 East Main Street Lakeland, FL 33801	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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

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: D. Walter Billingsley D. WALTER BILLINGSLEY 4-27-00 863-688-5869
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)