

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000096770

1. Entity Name

RBKY ARCHITECTS, INC.

FILED
Mar 28, 2000 8:00 am
Secretary of State

03-28-2000 90100 017 ***150.00

Principal Place of Business

Mailing Address

658 W. INDIANTOWN RD., STE. 210
JUPITER FL 33458

658 W. INDIANTOWN RD., STE. 210
JUPITER FL 33458-7535

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-859522

Applied For

Not Applicable

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

BORGLUND, ROLAND E
5834 SENEGAL CT.
JUPITER FL 33458

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

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PRESIDENT
ROLAND E. BORGLUND
5834 SENEGAL CT.
JUPITER, FL 33458

VICE PRESIDENT
KELLY D. YATES
3773 HEATHER DRIVE NW
GREEN ACRES, FL 33463

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 executor 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/17/00 (561) 747-9234