

2000 UNIFORM BUSINESS REPORT (JBR)

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DOCUMENT # P99000097750

1. Entity Name

A.T.N. COVEL, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

03-08-2000 90005 001 ***150.00

Principal Place of Business 3947 58TH STREET NORTH ST. PETERSBURG FL 33709	Mailing Address 3947 58TH STREET NORTH ST. PETERSBURG FL 33709-6009
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2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3608274		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BOWERMASTER, TRACIE L 3947 58TH STREET NORTH ST. PETERSBURG FL 33709		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 Tracie L Bowermaster Tracie L Bowermaster 3.23.00
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			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	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
PRESIDENT EDWARD S. COVEL 12148 73RD ST. LARGO FL 33773					
TRACIE L. BOWERMASTER 6492 107TH TER PINELLAS PARK, FL 33782	<input type="checkbox"/> Delete	VICE PRESIDENT			
SECRETARY DAVID L. SEAMAN 6492 107TH TER PINELLAS PARK, FL 33782	<input type="checkbox"/> Delete				
	<input type="checkbox"/> Delete				
	<input type="checkbox"/> Delete				
	<input type="checkbox"/> Delete				
	<input type="checkbox"/> Delete				

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: Tracie L Bowermaster 3.2.00 727.324.3209
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED34 (9/99)