

2000 UNIFORM BUSINESS REPORT (UBR)

5/11

FILED

Jun 29, 2000 8:00 am
Secretary of State

05-18-2000 90336 046 ***158.75

DOCUMENT # P99000098326

1. Entity Name

SAVAGE ARMADILLO, INC.

Principal Place of Business

Mailing Address

116 TREASURE ISLAND CAUSEWAY
TREASURE ISLAND FL 33706116 TREASURE ISLAND CAUSEWAY
TREASURE ISLAND FL 33706-4716

2. Principal Place of Business

3. Mailing Address

116-Treasure Island Causeway

PO Box 5422

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Treasure Island FL

City & State

Largo, FL

Zip

33706

Country

USA

Zip

33773

Country

USA

4. FEI Number

59-3608192

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

GAYTON, JOSEPH E
116 TREASURE ISLAND CAUSEWAY
TREASURE ISLAND FL 33706

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

Paul Bigotti

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

April 28, 2000

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 State10. 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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D BIGOTTI, PAUL M 13067 WASHINGTON AVENUE LARGO FL 33773	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	D SEMPLER, SCOTT 284 KATHERINE BOULEVARD, APT. 8211 PALM HARBOR FL 34684	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<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)(l), 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:

S. Bigotti

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 2000 (727) 421-1176

CR2E034 (9/99)