

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000103159

1. Entity Name

GRADY'S GOLF LIQUIDATION OUTLET INC.

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

04-18-2000 90222 037 ***158.75

Principal Place of Business

5426 11TH AVE.
FT. MYERS FL 33907

Mailing Address

5426 11TH AVE.
FT. MYERS FL 33907

2. Principal Place of Business

6765 Idlewild st.
Suite, Apt. #, etc.

3. Mailing Address

6765 Idlewild st
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FT. Myers Florida

City & State

FT. Myers Florida

4. FEI Number

65-0966382

Applied For

Not Applicable

Zip

33912

Country

Lee

Zip

33912

Country

Lee

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRADY, PATRICK

5426 11TH AVE.

FT. MYERS FL 33907

6765 Idlewild st.
Ft. Myers FL 33912

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

Patrick Grady

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

(NOTE: Registered Agent signature required when reinstating)

2-18-2000

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 ☒ Delete
NAME GRADY, PATRICK
STREET ADDRESS 5426 11TH AVE.
CITY-ST-ZIP FT. MYERS FL 33907

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME President
STREET ADDRESS Grady, Patrick
CITY-ST-ZIP 6765 Idlewild st.
Ft. Myers FL 33912

TITLE ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Vice Chairman
STREET ADDRESS Wendy C. Grady
CITY-ST-ZIP 6765 Idlewild st.
Ft. Myers FL 33912

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patrick Grady

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-3-00 941-275-3907

Date

Daytime Phone #

CR2E034 (9/99)