

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000106416

1. Entity Name

BUNGALOW BEACHSIDE INVESTMENTS, INC.

Principal Place of Business

2414 BEE RIDGE ROAD  
SARASOTA FL 34239

Mailing Address

2414 BEE RIDGE ROAD  
SARASOTA FL 34239

2. Principal Place of Business

2000 Webber St

3. Mailing Address

2000 Webber St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0980945

Applied For

Not Applicable

Zip

34239

Country

SARASOTA

Zip

34239

Country

SARASOTA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEPHEN F. VOIGT, P.A.  
2414 BEE RIDGE ROAD  
SARASOTA FL 34239

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

Stephen F. Voigt, P.A.

4-23-01

Signature, typed or printed name of registered agent and date 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, 2001 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	P	<input checked="" type="checkbox"/> Delete
NAME	VOIGT, STEPHEN F	
STREET ADDRESS	2414 BEE RIDGE ROAD	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE	V	<input type="checkbox"/> Delete
NAME	ADAMS, CRAIG R	
STREET ADDRESS	2000 WEBBER ST	
CITY-ST-ZIP	SARASOTA FL 34239	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	President	
STREET ADDRESS	R. CRAIG Adams	
CITY-ST-ZIP	2000 Webber St SARASOTA, FL 34239	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**May 01, 2001 8:00 am**  
**Secretary of State**

05-01-2001 90070 005 \*\*\*150.00

00044696



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)