

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S01752

1. Entity Name
YEOMAN SERVICES, INC.

Principal Place of Business
**621 NORTH 70TH AVENUE
HOLLYWOOD FL 33024**

Mailing Address
**621 NORTH 70TH AVENUE
HOLLYWOOD FL 33024**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0214920**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MANNING, GEORGE A.
621 NORTH 70TH AVENUE
HOLLYWOOD FL 33024**

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 _____
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, 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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	DST	MANNING, GEORGE A.	621 N 70 AVENUE HOLLYWOOD FL 33024	<input type="checkbox"/>
	DP	MANNING, LOIS E.	621 N 70 AVENUE HOLLYWOOD FL 33024	<input type="checkbox"/>
	DV	MANNING, KARL A	621 N 70 AVENUE HOLLYWOOD FL 33024	<input type="checkbox"/>
	DV	MANNING, ALLEN C	20411 SW 1ST ST PEMBROKE PINES FL 33029	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: George A. Manning
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/2001
Date

(954) 985-8248
Daytime Phone #

FILED
Jan 12, 2001 8:00 am
Secretary of State

01-12-2001 90038 003 ***150.00

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DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)