

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90095 003 ***150.00

DOCUMENT # S21758

1. Entity Name

ROOKIES, INC.

Principal Place of Business

599 South Collier Blvd.
Marco Island, FL 34145

Mailing Address

599 South Collier Blvd.
Marco Island, FL 34145

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number
650312901

Accepted For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Donald K. Ross, Jr.
4501 Tamiami Trail North #400
Naples, FL 33940

7. Name and Address of New Registered Agent

Name **GARY J. HAUSLER, ESQ**
Street Address (P.O. Box Number is Not Acceptable)
950 N. Collier Blvd.
Suite 202
City **Marco Island** FL **34145**

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)

4/30/01

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	☐ Delete
	Stephanie Vann	599 S. Collier Blvd.	Marco Island, FL 34145	☐ ST VP
	P. S. Bell	Laura Bell	599 S. Collier Blvd.	
		Marco Island, FL	34145	
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete
				☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☒ Addition
	Stephanie Vann	599 S. Collier Blvd.	Marco Island, FL 34145		VP, D
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3), Florida Statutes. I further certify that the information submitted 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 617, Florida Statutes, and that my name appears in Block 11 or Block 12, or both, of this attachment with an address to which other like empowered

SIGNATURE AND TYPE / PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

941-394-6400