2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 02, 2001 8:00 am Secretary of State **COCUMENT # S30468** AMERICAN SEAGULL, INC. 02-02-2001 90247 007 ***150.00 Principal Place of Business Mailing Address 26600 ACE AVENUE 26600 ACE AVENUE LEESBURG FL 34748 LEESBURG FL 34748 912744 2. Principal Place of Business 3. Mailing Address 8500 US HWY 8500 US Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3059225 Not Applicable \$8.75 Additional 3478 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PRINGLE, GEORGE O. Street Address (P.O. Box Number is Not Acceptable) 8500 US Huy 441 26600 ACE AVE. LEESBURG FL 34748 Lees Lung F1 34788 Zip Code Z ur 78 B 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 ered Agent signatur FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE PRINGLE, GEORGE O. Single, George O 8500 US Huy WHI Lees true FL NAME NAME 26600 ACE AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEESBURG FL CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition PRINGLE, GEORGE O. NAME NAME 26600 ACE AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LEESBURG FL ☐ Delete TITLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-ST-7IP CITY- ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 ap-address, with all other like empowered. SIGNATURE: