## 2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # \$61975**

Country

The state of the s

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

TOULOUMIS, WILLIAM E.

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

1060 KEEN RD **DUNEDIN FL 34698** 

6. Name and Address of Current Registered Agent

Zip

TOULOUMIS, TOULOUMIS & ASSOCIATES, P.A.					
Principal Place of Business	Mailing Address				
1060 KEENE RD DUNEDIN FL 34698	1060 keene RD 2454 mcMullen Booth Road. Suite 421 Dunedin Fl 34699-6300				
2. Principal Place of Business	3. Mailing Address 1060 KEENE ROAD				
Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State	City & State				

DUNEDIN, FL

Zip

34698

**FILED** Apr 17, 2000 8:00 am Secretary of State

04-17-2000 90010 008 \*\*\*150.00



(See criter	ia on back)	Make Check Payable	to Department	t of State			, -
11. OFFICERS AND DIRECTORS			12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Touloumis, William E. 1060 Keene RD Dunedin Fl 34698	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1060 KI	MIS, WILLIAM E EENE ROAD N. FL 34698	<b>⊠</b> Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DONEDIN 12 01030	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSIST. TOULOUN 1060 KE		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		BUU EENE ROAD N, FL. 34698	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1060 KE	JONATHAN D EENE ROAD N. FL. 34698	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSIST. RAFALIE 1060 KE		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	May	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSIST. BUFO, K	. V KATHY EENE ROAD L. FI. 34698	☐ Change	Addition
13. I hereby certify that the information supplied with this filling class not challenged by the examption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied and indicated on this report or supplied by the corporation of th							

SIGNATURE:

of the corporation or the changed, or on an attack

> PHINTED NAME OF SIGNING OFFICER OR DIRECTOR Touloumis William E

3/31/00

727/738-9822

Davtime Phone #