

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 21, 2001 8:00 am**  
**Secretary of State**

03-21-2001 90058 009 \*\*\*150.00

**DOCUMENT # S72514**

1. Entity Name

**VRK ENTERPRISES, INC.**

Principal Place of Business

**3576 WEBBER ST  
SARASOTA FL 34239  
US**

Mailing Address

**3576 WEBBER ST  
SARASOTA FL 34239  
US**

2. Principal Place of Business

3. Mailing Address

**P.O. Box 4234**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**SARASOTA FLORIDA**

4. FEI Number **65-0278095**

Applied For

Not Applicable

Zip

Country

Zip

Country

**34230**

**US**

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KING, VIRGINIA K.  
5525 BOULDER BLVD  
SARASOTA FL 34233**

Name **MICHAEL J. QUICKER, ESQ.**

Street Address (P.O. Box Number is Not Acceptable)  
**240 N. WASHINGTON BLVD.**

**SUITE 325**

City **SARASOTA**

**FL**

Zip Code **34236**

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

*Michael J. Quicker, Esq.*

**3/19/01**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PSD  
KING, VIRGINIA K.  
5525 BOULDER BLVD  
SARASOTA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VTD  
KING, ROBERT J.  
5525 BOULDER BLVD  
SARASOTA FL** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
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☐ Delete

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STREET ADDRESS  
CITY-ST-ZIP  
☐ 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)(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:

*Virginia K. King* **VIRGINIA KING**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/15/01**

Date

**941-925-3415**

Daytime Phone #

CR2E034 (10/00)

0414410