

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S94857

1. Entity Name

BAY AREA ENVELOPES, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90218 039 ***150.00

Principal Place of Business

6308 BENIAM ROAD
SUITE 714
TAMPA FL 33634
US

Mailing Address

4710 EISENHOWER BLVD.
SUITE F-2
TAMPA FL 33634

2. Principal Place of Business

4710 EISENHOWER BLVD.

Suite, Apt. #, etc.

SUITE B-10

City & State

TAMPA, FLORIDA

Zip

33634

Country

USA

3. Mailing Address

4710 EISENHOWER BLVD.

Suite, Apt. #, etc.

SUITE B-10

City & State

TAMPA, FLORIDA

Zip

33634

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3099770

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HEDLER, JOHN
4710 EISENHOWER BLVD.
SUITE B-12
TAMPA FL 33634

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 JOHN K. HEDLER, JR., TREASURER

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

4/20/01

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 ☐ Delete
NAME P
STREET ADDRESS DONOGHUE, DANIEL
CITY-ST-ZIP 6441 LAKE SUNRISE
APOLLO BEACH FL

TITLE ☐ Delete
NAME T
STREET ADDRESS HEDLER, JOHN K., JR.
CITY-ST-ZIP 6513 SEABIRD WAY
APOLLO BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

JOHN K. HEDLER, JR. 1/5/01 813-886-1415

CR2E034 (10/00)