

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S98654

1. Entity Name

MARTIN MANAGEMENT CONSULTING, INC.

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90075 020 ***150.00

Principal Place of Business

Mailing Address

2511 DOLLY BAY DR
#306
PALM HARBOR FL 34684
US

P.O. BOX 98
PALM HARBOR FL 34682-0098
US

2. Principal Place of Business

590 BAYWOOD DR. N.

3. Mailing Address

Suite, Apt. #, etc.

City & State

DUNEDIN, FL

City & State

Zip

Country

34698

USA

Zip

Country

4. FEI Number

59-3094217

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GOTTLIEB & GOTTLIEB P.A.
2475 ENTERPRISE RD
S200
CLEARWATER FL 34623

7. Name and Address of New Registered Agent

Name

WILLIAM W. MARTIN

Street Address (P.O. Box Number is Not Acceptable)

590 BAYWOOD DR. N.

City

DUNEDIN

FL

Zip Code

34698

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

William W. Martin WILLIAM W. MARTIN, PRESIDENT

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, 2000 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 PTS
NAME MARTIN, WILLIAM W.
STREET ADDRESS 2511 DOLLY BAY DR #306
CITY-ST-ZIP PALM HARBOR FL 34684 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition
590 BAYWOOD DRIVE N.
DUNEDIN, FL 34698

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

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

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

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

TITLE
NAME
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:

William W. Martin WILLIAM W. MARTIN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/3/00

727-753-5468

Daytime Phone #

CR2E034 (9/99)