

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V04754

1. Entity Name

STACY LANIER OPTICAL, INC.

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90199 016 ***150.00

Principal Place of Business

77 TIFTON WAY NORTH
PONTE VERDA BCH FL 32082
US

Mailing Address

77 TIFTON WAY NORTH
PONTE VERDA BCH FL 32082-4135
US

2. Principal Place of Business

105 MILL COVE LN.

Suite, Apt. #, etc.

3. Mailing Address

105 MILL COVE LN

Suite, Apt. #, etc.

City & State

PONTE VEDRA BCH, FL.

City & State

PONTE VEDRA BCH, FL.

Zip

32082

Country

St. Johns

Zip

32082

Country

St. Johns

4. FEI Number

59-3126325

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LANIER, STACY
77 TIFTON WAY NORTH
PONTE VEDRA BEACH FL 32082

New Address →

7. Name and Address of New Registered Agent

Name

LANIER, STACY

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

105 MILL COVE LN.

City

PONTE VEDRA BCH

FL

Zip Code

32082

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

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 ☐ Delete
NAME D
STREET ADDRESS LANIER, STACY
CITY-ST-ZIP 77 TIFTON WAY N 105 MILL COVE LN.
PONTE VEDRA BCH 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

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
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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 the empowered.

SIGNATURE: STACY LANIER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/00

Date

(904) 273-0805

Daytime Phone #

CR2E034 (9/99)