

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V23878

1. Entity Name

HERB R. LUNDY, INC.

Principal Place of Business

6713 32ND AVE W  
BRADENTON FL 34209  
US

Mailing Address

6713 32ND AVE W  
BRADENTON FL 34209-7113  
US

2. Principal Place of Business

6441 SEA GULL DR  
Suite, Apt. #, etc. 272  
City & State BRADENTON FL

3. Mailing Address

6441 SEA GULL DR  
Suite, Apt. #, etc. 272  
City & State BRADENTON FL

Zip 34210

Country USA

Zip 34210

Country USA

6. Name and Address of Current Registered Agent

LUNDY, HERB R  
6713 32ND AVE W  
BRADENTON FL 34209

7. Name and Address of New Registered Agent

Name LUNDY, HERB R.  
Street Address (P.O. Box Number is Not Acceptable) 6441 SEA GULL DR  
\* 272  
City BRADENTON FL Zip Code 34210

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 HERB R. LUNDY Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE April 19, 2000

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 NAME STREET ADDRESS CITY-ST-ZIP	DPS LUNDY, HERB R. 6713 32ND AVE W BRADENTON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LUNDY, HERB R. 6713 32ND AVE W BRADENTON FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS LUNDY, HERB R. 6441 SEA GULL DR * 272 BRADENTON FL 34210	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LUNDY, HERB R. 6441 SEA GULL DR 272. BRADENTON FL 34210	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE April 19, 2000 941-750-0104  
Daytime Phone #

FILED  
Apr 25, 2000 8:00 am  
Secretary of State

04-25-2000 90144 009 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)