

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90326 015 ***150.00

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 AV

DOCUMENT # V27231

1. Entity Name
RAMROD, INC.

Principal Place of Business
27300 OVERSEAS HIGHWAY
RAMROD KEY FL 33042-5410
US

Mailing Address
27300 OVERSEAS HIGHWAY
RAMROD KEY FL 33042-5410
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0464958**

Applied For
 Not Applicable

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

CUMMINS, KAREN ELIZABETH
27300 OVERSEAS HIGHWAY
RAMROD FL 33042

Name **MOORE Elaine G.**

Street Address (P.O. Box Number is Not Acceptable)
30752 Palm Drive

City **Big Pine Key FL** Zip Code **33043**

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 **Elaine G. Moore**

4/10/02

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, 2002 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 **PD** ☐ Delete
 NAME **MOORE, JAMES E., SR.**
 STREET ADDRESS **30752 PALM DRIVE**
 CITY-ST-ZIP **BIG PINE KEY FL**

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

TITLE **TD** ☐ Delete
 NAME **MOORE, ELAINE G.**
 STREET ADDRESS **30752 PALM DRIVE**
 CITY-ST-ZIP **BIG PINE KEY FL**

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

TITLE **VD** ☐ Delete
 NAME **MOORE, JAMES E., JR.**
 STREET ADDRESS **14930 STUART RD**
 CITY-ST-ZIP **SAN ANTONIO TX**

TITLE ☒ Change ☐ Addition
 NAME **MOORE James E. Jr.**
 STREET ADDRESS **3398 Jasmine Ave.**
 CITY-ST-ZIP **Las Vegas, NV. 89135**

TITLE **SD** ☐ Delete
 NAME **CUMMINS, KAREN ELIZABETH**
 STREET ADDRESS **27300 OVERSEAS HWY**
 CITY-ST-ZIP **RAMROD KEY FL**

TITLE ☒ Change ☐ Addition
 NAME **Cummins Karen Elizabeth**
 STREET ADDRESS **9300 Concord Road**
 CITY-ST-ZIP **St Cloud, FL. 34773**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **Elaine G. Moore Elaine G. Moore 4/10/02 305-872-1134**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)