

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V41872

1. Entity Name

B. & J. EMU RANCH, INC.

FILED

Feb 04, 2000 8:00 am
Secretary of State

02-04-2000 90023 007 ***150.00

Principal Place of Business

Mailing Address

29225 S JONES LOOP RD
PUNTA GORDA FL 33950

29225 S JONES LOOP RD
PUNTA GORDA FL 33695-1778

6306 Eaglebrook Av
Tampa FL 33625

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0340393

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MORIN, DANNY W
29225 S. JONES LOOP ROAD
PUNTA GORDA FL 33950

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MORIN, BENOIT
STREET ADDRESS 29225 S JONES LOOP RD
CITY-ST-ZIP PUNTA GORDA FL ☐ Delete

TITLE MORIN BENOIT
NAME MORIN BENOIT
STREET ADDRESS 6306 Eaglebrook Av.
CITY-ST-ZIP Tampa FL 33625 ☒ Change ☐ Addition

TITLE T
NAME MORIN, DANNY W
STREET ADDRESS 29225 S JONES LOOP RD
CITY-ST-ZIP PUNTA GORDA FL 33950 ☐ Delete

TITLE MORIN DANNY W
NAME MORIN DANNY W
STREET ADDRESS 6306 Eaglebrook Av.
CITY-ST-ZIP Tampa FL 33625 ☒ Change ☐ Addition

TITLE Jacqueline MORIN
NAME Jacqueline MORIN
STREET ADDRESS 6306 Eaglebrook Av
CITY-ST-ZIP Tampa FL 33625 ☐ Delete

TITLE
NAME
STREET ADDRESS Change of Address.
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE Morretti Bradley
NAME Morretti Bradley
STREET ADDRESS 6306 Eaglebrook Av.
CITY-ST-ZIP Tampa FL 33625 ☐ Delete

TITLE
NAME
STREET ADDRESS change of Address.
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/28/00 813-908-6846
Date Daytime Phone #

CR2E034 (9/99)