**FILED** 

## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Feb 08, 2001 8:00 am **DOCUMENT # V41872 Secretary of State** B. & J. EMU RANCH, INC. 02-08-2001 90051 004 \*\*\*150.00 Principal Place of Business Mailing Address 29225 S JONES LOOP RD 6306 EAGLEBROOK AVE PUNTA GORDA FL 33950 TAMPA FL 33625 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 65-0340393 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MORIN, DANNY W Street Address (P.O. Box Number is Not Acceptable) 29225 S. JONES LOOP ROAD PUNTA GORDA FL 33950 City 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME MORIN, BENOIT STREET ADDRESS STREET ADDRESS 6306 EAGLEBROOK AVE CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33625** ☐ Addition Change TITLE □ Delete TITLE NAME NAME MORIN, DANNY W STREET ADDRESS STREET ADDRESS 6306 EAGLEBROOK AVE CITY-ST-ZIP CITY-ST-7IP **TAMPA FL 33625** TITLE Addition ☐ Change TITLE" NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change TITLE TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

with an address, with all other like empowered.

changed, or on an attachme

SIGNATURE:

the 3 Additions.

were in the

bompany of

since 1992, why

are they not

showing up
every great & have

To pat them back.