

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J62554

1. Entity Name  
AAHB, INC.

**FILED**  
Sep 15, 2002 8:00 am  
Secretary of State

09-15-2002 90085 014 \*\*\*550.00

0086903  
AV

Principal Place of Business

C/O BARTLETT, LUCY W  
11405 STARKEY ROAD  
LARGO FL 33773  
US

Mailing Address

C/O BARTLETT, LUCY W  
11405 STARKEY RD  
LARGO FL 33773  
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2320 Nellie St

Suite, Apt. #, etc.

3. Mailing Address

2320 Nellie St

Suite, Apt. #, etc.

City & State

LARGO, Florida

City & State

LARGO, FLORIDA

4. FEI Number 59-2803720

Applied For  
Not Applicable

Zip 33774

Country Pinellas

Zip 33774

Country Pinellas

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARTLETT, LUCY W.  
2320 NELLIE ST  
LARGO FL 34644

7. Name and Address of New Registered Agent

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, I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Lucy Bartlett*

9-11-02

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 V  
NAME LIGHTFOOT, TERESA L.  
STREET ADDRESS 8192 HOPEWELL CT.  
CITY-ST-ZIP SEMINOLE FL ☐ Delete

TITLE P  
NAME BARTLETT, LUCY W  
STREET ADDRESS 2320 NELLIE ST  
CITY-ST-ZIP LARGO, FL ☐ Delete

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 V ☒ Change ☐ Addition  
NAME LIGHTFOOT, TERESA L.  
STREET ADDRESS 1050 STARKEY RD #401  
CITY-ST-ZIP LARGO, FLORIDA 33773

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

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

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

TITLE ☐ Change ☐ Addition  
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:

*Lucy Bartlett*

9-11-02

727-586-5215

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)