

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90119 041 ***150.00

DOCUMENT # L91894

1. Entity Name
BEEMER, PRICHER, KUEHNHACKL, AND HEIDBRINK, P.A.

Principal Place of Business
250 N ORANGE AVE
1500
ORLANDO FL 32801
US

Mailing Address
200 S. ORANGE AVE.
SUITE 2300
ORLANDO FL 32801-3432

2. Principal Place of Business
1560 N. ORANGE AVE
 Suite, Apt. #, etc.
SUITE 600
 City & State
WINTER PARK, FL
 Zip
32789 Country
U.S.A.

3. Mailing Address
1560 N. ORANGE AVE
 Suite, Apt. #, etc.
SUITE 600
 City & State
WINTER PARK, FL
 Zip
32789 Country
U.S.A.



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3023516** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
A.G.C. CO.
200 SOUTH ORANGE AVE
SUITE 2300
ORLANDO FL 32801

7. Name and Address of New Registered Agent
 Name **KURT R. KUEHNHACKL**
 Street Address (P.O. Box Number is Not Acceptable)
1015 ALMOND TREE CIRCLE
 City **ORLANDO** FL Zip Code **32835**

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

3-7-02

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
VPD	BEEMER, BRADFORD S.	3523 HARGILL DR	ORLANDO FL 32806	☐
PD	KUEHNHACKL, KURT R.	1015 ALMOND TREE CIRCLE	ORLANDO FL	☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE <td>NAME <td>STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td> </td></td>	NAME <td>STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td> </td>	STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td>	CITY-ST-ZIP	☐ Change ☐ Addition
TITLE <td>NAME <td>STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td> </td></td>	NAME <td>STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td> </td>	STREET ADDRESS <td>CITY-ST-ZIP</td> <td>☐ Change ☐ Addition</td>	CITY-ST-ZIP	☐ Change ☐ Addition
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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, for on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-02

407-998-9000

CR2E034 (9/01)

ORIGINAL CHECK STUB

BEEMER, PRICHER, KUEHNHACKL & HEIDBRINK, P.A.

7370

Department of State

3/14/2002

Date	Type	Reference	Original Amt.	Balance Due	Discount	Payment
03/07/2002	Bill	FEI 59-3023516	150.00	150.00		150.00
				Check Amount		150.00

Spoke to

Ester

mailed 03/14/02/smg

make copy, sign copy w/another
Original Signature & ck for \$150.
Send w/letter stating circumstances.

Checking - Citrus Bank

150.00

1-850-245-6059

Attachment



BEEMER, PRICHER, KUEHNHACKL & HEIDBRINK, P.A.
CERTIFIED PUBLIC ACCOUNTANTS
AND CONSULTANTS

#L91894

1560 N. ORANGE AVENUE, SUITE 600, WINTER PARK, FLORIDA 32789-5540
(407) 998-9000 / FAX (407) 998-9010

Uniform Business Report
Division of Corporations
P.O.Box 1500
Tallahassee, FL 32302-1500

September 6, 2002

RE: UBR FOR FEI NUMBER 59-3023516

Dear Sir or Madam:

We completed and mailed our Uniform Business Report for 2002 on March 14, however, we recently noticed that our check had not cleared our bank. We spoke with Ester in your office who instructed us to copy the return, provide an original signature and send a replacement check for the \$150. We have done so. I sincerely apologize that you did not receive our report; we mailed it in a timely manner and thought you had received it.

If you have any questions or need further information, please contact Sue Gannon or me at 407-998-9009. Thank you for your assistance with this matter.

Sincerely,

Kurt R. Kuehnhackl
President