

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2002 8:00 am
Secretary of State

03-06-2002 90057 038 ***158.75

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DOCUMENT # M95457

1. Entity Name
ASSOCIATES & RICHARD E. CLARE, INC.

Principal Place of Business Mailing Address
~~15617 IONA LAKES DR.~~ **14801 PARK LAKE DR.** **P.O. BOX 08130**
FORT MYERS FL 33908 **#206** **FORT MYERS FL 33908**
US

DJ031406



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business **14801 PARK LAKE DR.**
 Suite, Apt. #, etc. **APT # 206**

3. Mailing Address **P.O. BOX 08130**
 Suite, Apt. #, etc.

City & State **FORT MYERS, FL**

City & State **FORT MYERS, FL**

4. FEI Number **65-0069728**

Applied For
 Not Applicable

Zip **33919** Country **USA**

Zip **33908** Country **USA**

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

6. Name and Address of Current Registered Agent

CLARE, RICHARD E
~~**15617 IONA LAKES DR.**~~
~~**FORT MYERS FL 33908**~~

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
14801 PARK LAKE DR. #206
 City **FORT MYERS** **FL** Zip Code **33919**

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 **RICHARD E. CLARE, PRESIDENT** *Richard E. Clare* **2-20-2002**
 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	PT	☐ Delete
NAME	CLARE, RICHARD E	
STREET ADDRESS	15617 IONA LAKES DR.	
CITY-ST-ZIP	FT. MYERS FL 33908	
TITLE	VS	☐ Delete
NAME	CLARE, JANE E	
STREET ADDRESS	15617 IONA LAKES DR.	
CITY-ST-ZIP	FT. MYERS FL 33908	
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	PT	☒ Change ☐ Addition
NAME	CLARE, RICHARD E.	
STREET ADDRESS	14801 PARK LAKE DR. #206	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE	VS	☒ Change ☐ Addition
NAME	CLARE, JANE E.	
STREET ADDRESS	14801 PARK LAKE DR. #206	
CITY-ST-ZIP	FORT MYERS FL 33919	
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: *Richard E. Clare, President*

2-20-2002 941-466-4228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)