

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000001438

1. Entity Name

RONALD PHILIPS, INC.

**FILED**  
**Sep 12, 2000 8:00 am**  
**Secretary of State**

09-12-2000 90017 030 \*\*\*158.75

Principal Place of Business  
 2370 COUNTRY OAKS LANE  
 PALM BEACH FL 33410

Mailing Address  
 2370 COUNTRY OAKS LANE  
 PALM BEACH FL 33410

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0995164

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

PHILIPS, RONALD  
 2370 COUNTRY OAKS LANE  
 PALM BEACH FL 33410

7. Name and Address of New Registered Agent

Name

HARVEY PHILIPS

Street Address (P.O. Box Number is Not Accepted)

1771 HIGHLAND DR.

City

JUNO BEACH

FL

Zip Code

33408

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 (applicable)

HARVEY PHILIPS

(NOTE: Registered Agent signature required when reinstating)

DATE

9/3/00

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, 2000 Min. 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 ☐ 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

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 ☐ Change ☒ Addition  
 NAME P  
 STREET ADDRESS  
 CITY-ST-ZIP  
 PRES.  
 RONALD PHILIPS  
 2370 COUNTRY OAKS LANE  
 PALM BEACH GARDENS FL. 33410

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:

*[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD PHILIPS

Date

Daytime Phone #

9/3/00 561-630-6901

CR2E034 (5/00)

attachment  
P00000001438  
Bo/06021

9/3/00

To Whom It May Concern.

Please Be informed That I  
DID NOT RECEIVE A UBR REPORT IN  
JANUARY OF THIS YEAR. I ONLY GOT THIS  
REPORT DUE 9/13.

I CALLED YOUR OFFICE AND WAS TOLD  
TO MAIL \$150 WITH THIS LETTER.  
THANK YOU

Ronald Philips  
RONALD PHILIPS