

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State

01-30-2002 90132 005 ***150.00

DOCUMENT # P01000027898

1. Entity Name
FISHER & BUTTS, P.A.

Principal Place of Business

5203 SW 91ST TERR.
GAINESVILLE FL 32608

Mailing Address

5203 SW 91ST TERR.
GAINESVILLE FL 32608

2. Principal Place of Business

5203 SW 91st Terrace

Suite, Apt. #, etc.

Suite D

City & State

Gainesville, FL

Zip

32608

Country

USA

3. Mailing Address

5203 SW 91st Terrace

Suite, Apt. #, etc.

Suite D

City & State

Gainesville, FL

Zip

32608

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3713169

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUTTS, ROBERT P
5203 SW 91ST TERR.
GAINESVILLE FL 32608

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.

SIGNATURE

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 **D** ☐ Delete
NAME **BUTTS, ROBERT P**
STREET ADDRESS **3909 SW 92ND TERR.**
CITY-ST-ZIP **GAINESVILLE FL 32608**

TITLE **D** ☐ Delete
NAME **FISHER, MARK S**
STREET ADDRESS **6733 NW 34TH DR.**
CITY-ST-ZIP **GAINESVILLE FL 32653**

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
STREET ADDRESS **4854 SW 91st CT.**
CITY-ST-ZIP **GAINESVILLE, FL 32608**

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

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

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mark S. Fisher

01/16/02

(352) 373-5922

Date

Daytime Phone #

CR2E034 (9/01)