FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Oct 02, 2002 8:00 am Secretary of State P01000039828 DOCUMENT # 1. Entity Name 10-02-2002 90119 030 \*\*\*150.00 MCINTOSH VENTURES, INC. Principal Place of Business Mailing Address 748 LAGOON DR. 748 LAGOON DR. NORTH PALM BEACH FL 33408 NORTH PALM BEACH FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MCINTOSH, STEPHEN 748 LAGOON DR. NORTH PALM BEACH FL 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. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. **\$5.00** May Be After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete Addition Change MCINTOSH, STEPHEN Gregory McIntash 148 Lagoon Dr. NAME STREET ADDRESS 748 LAGOON DR. Layoun Dr. STREET ADDRESS NORTH PALM BEACH FL 33408 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change T, V Addition NAME NEALY LAGOON Dr. NAME STREET ADDRESS STREET ADDRESS 748 CITY-ST-ZIP CITY-ST-ZIP Palm 33408 TITLE Delete TITLE Addition NAME NAME Christel McIntosh STREET ADDRESS STREET ADDRESS 513 Anchorage Oc. CITY-ST-7IP CITY-ST-ZIP 33408 Paln TITLE ☐ Delete TITLE □ Addition NAME NAME STREET ADDRESS STREET ADDRESS Anchorage Dr. CITY-ST-ZIP CITY-ST-ZIP 33408 ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP 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:

S61-317-4969

## Attachment MCINTOSH VENTURES, INC.

4P01000039828

To:

**Division of Corporations** 

Uniform Business Report Filings

P.O. Box 1500

Tallahassee, FL 32302-1500

From: Steve-McIntosh

Date: September 1<sup>st</sup>, 2002

RE:

Filing of Uniform Business Report

We respectfully request that the late fee associated with filing this Uniform Business Report for 2002 be waived. Our corporation, McIntosh Ventures, Inc., did not receive the prior notice that the report needed to be filed.

Thank you for your understanding in this matter,

Respectfully yours,

Christel McIntosh

McIntosh Ventures, Inc.