2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2001 8:00 am
Secretary of State
09-12-2001 90010 008 ***550.00

DOCUMENT # P96000043572

1. Entity Name
MATTHEW ANDERSON AND ASSOCIATES, INC.

Principal Place of Business	Mailing Address
~~6971 NORTH FEDERAL HWY., #102-B~~	~~6971 NORTH FEDERAL HWY., #102-B~~
~~BOCA RATON FL 33487~~	~~BOCA RATON FL 33487~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
398 W. Camino	398 W. Camino
Suite, Apt. #, etc. Gardens Blvd #209	Suite, Apt. #, etc. Gardens Blvd. #209
City & State Boca Raton, Fl.	City & State Boca Raton, Fl.
Zip 33432 Country U.S.A.	Zip 33432 Country U.S.A.

4. FEI Number 65-0670137 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ANDERSON, JOLYNN
~~6971 NORTH FEDERAL HWY., #102-B~~ 398 W. Camino Gardens Blvd. #209
~~BOCA RATON FL 33487~~ Boca Raton, Fl 33432

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 Jolynn B. Anderson 9/5/01
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 $550.00
After September 12, 2001 Fee 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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ANDERSON, MATTHEW ~~6971 NORTH FEDERAL HWY., #102-B~~ see above ~~BOCA RATON FL 33487~~	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ANDERSON, JOLYNN ~~6971 NORTH FEDERAL HWY., #102-B~~ see address ~~BOCA RATON FL 33487~~	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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CR2E034 (5/01)

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: Jolynn B. Anderson Jolynn B. Anderson, 9/5/01 (561) 362-4049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #