

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 14, 2002 8:00 am
Secretary of State

08-14-2002 90022 013 ***550.00

DOCUMENT # P97000004593

1. Entity Name
KELLEY COMPANY, INC.

Principal Place of Business
1861 SOUTH PATRICK DRIVE, SUITE 128
INDIAN HARBOR BEACH FL 32937

Mailing Address
1861 SOUTH PATRICK DRIVE, SUITE 128
INDIAN HARBOR BEACH FL 32937

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 **65-0718481**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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. 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)

DATE: 08/14/2002

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, 2002 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: **PTD** ☐ Delete
 NAME: **KELLEY, MICHAEL B**
 STREET ADDRESS: **1861 SOUTH PATRICK DRIVE, SUITE 128**
 CITY-ST-ZIP: **INDIAN HARBOR BEACH FL 32937**

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

TITLE: **VSD** ☐ Delete
 NAME: **KELLEY, SUSAN C**
 STREET ADDRESS: **1861 SOUTH PATRICK DRIVE, SUITE 128**
 CITY-ST-ZIP: **INDIAN HARBOR BEACH FL 32937**

TITLE: ☐ Change ☐ Addition
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 CITY-ST-ZIP:

TITLE: ☐ Delete
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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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 07/28/02 Daytime Phone #: 321 537-9901

CR2E034 (4/02)

Attachment
P# PD/000004053

NICK P. COLA, CPA, P.A.

*Countryside Colonial House
2759 State Road 580, Suite 211
Clearwater, FL 33761
Voice: (727) 797-3905
Fax: (727) 799-9240
Email: nickcolacpa.aol.com*

August 9, 2002

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Regarding the two enclosed UBR forms, I am the CPA for the two corporations, as well as the registered agent for one of the corporations. In both cases we did not receive the initial UBR form. Could you please verify the mailing address for each corporation, as they are the same. The address indicated on each UBR is correct. I do not know why we did not receive the initial UBR, but did receive the second notice.

I have enclosed a check for \$150.00 for each corporation. Could you grant us a waiver of penalty on both corporations, since we did not receive the initial UBR for either corporation.

I thank you in advance for your anticipated cooperation.

Sincerely,

Nick P. Cola, CPA