

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2003 8:00 am
Secretary of State

03-13-2003 90078 037 ***150.00

DOCUMENT # P97000047649

1. Entity Name
RICKARD & ASSOCIATES, P.A.



Principal Place of Business
**1000 N ASHLEY DR
TAMPA FL 33602**

Mailing Address
**1000 N ASHLEY DR
TAMPA FL 33602**

2. Principal Place of Business
3980 TAMPA Rd

3. Mailing Address

Suite, Apt. #, etc.
Suite 202

Suite, Apt. #, etc.
SAME

City & State
Oldsmar, FL

City & State

4. FEI Number **59-3449343**

Applied For
Not Applicable

Zip
34677

Country
USA

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**RICKARD, JAMES I III
1000 N ASHLEY DR.
SUITE 101
TAMPA FL 33602**

7. Name and Address of New Registered Agent

Name

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

3980 TAMPA Rd

Suite 202

City
Oldsmar

FL

Zip Code
34677

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **RICKARD, JAMES I III**
STREET ADDRESS **1000 N ASHLEY DR. SUITE 101**
CITY-ST-ZIP **TAMPA FL 33602**

TITLE **ST** ☐ Delete
NAME **RICKARD, DENISE A**
STREET ADDRESS **1000 N ASHLEY DR., STE 101**
CITY-ST-ZIP **TAMPA FL 33602**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3980 TAMPA Rd, Suite 202**
CITY-ST-ZIP **Oldsmar, FL 34677**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **3980 TAMPA Rd, Suite 202**
CITY-ST-ZIP **Oldsmar, FL 34677**

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **James Rickard**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/11/03 (813) 227-9555
Date Daytime Phone #

CR2E034 (10/02)



Rickard & Associates, P.A.
Certified Public Accountants and Consultants

Attachment

80053814

March 11, 2003

Florida Department of State
PO Box 1500
Tallahassee, FL 32302-1500

Re: Rickard & Associates, P.A.

FEIN#: 59-3449343

Document#: P97000047649

Please be advised that we will be moving our offices to Oldsmar approx. June 1, 2003. The 2003 UBR has been completed with the updated address.

If there are any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

James I. Rickard, III, CPA
President