## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #** P99000050961

1. Entity Name

RICHARD RALPH VANATTA, P.A.



**FILED** Mar 10, 2003 8:00 am § Secretary of State

03-10-2003 90777 001 \*\*\*150.00

					<b>′</b>
Principal Place of Business 2664 SLOW FLIGHT DRIVE DAYTONA BEACH FL 32128 US		Mailing Address 2664 SLOW FLIGHT DRIVE DAYTONA BEACH FL 32128 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES
City & State		City & State			4. FEI Number 59-3562352 Applied For
Zip	Country	Zip	Country		5. Certificate of Status Desired See Required
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Registered Agent
			N	lame	
FOSTER, WALTER E III 315 S PALMETTO AVE DAYTONA BEACH FL 32114			S	treet Address	(P.O. Box Number is Not Acceptable)
DATIONA	N BEACH FL 32114		C	ity	FL Zip Code
8. The above	e named entity submits this statement for	r the purpose of changing its	s registered of	ffice or registe	ered agent, or both, in the State of Florida. I am familiar with, and accept
the obliga		i the purpose of changing its	s registered of	ilice or registe	red agent, or both, in the State of Florida. I am familiar with, and accept
JIGINATURE 	Signature, typed or printed name of registered agent a	and title if applicable. (NOT	TE: Registered Age	nt signature required	d when reinstating) DATE
, <sup>≉</sup> Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of		· , <u>.</u>		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees
10.	OFFICERS AND I		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANATTA, RICHARD RALPH 2664 SLOW FLIGHT DRIVE DAYTONA BEACH FL 32128	☐ Delete	TITLE NAME STREET ADD		Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VANATTA, JONNIE 2664 SLOW FLIGHT DR DAYTONA BEACH FL 32128	□ Delete	TITLE NAME STREET ADD CITY-ST-21		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZIF		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDI CITY-ST-ZIF		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR	1 1	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with the	☐ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP		☐ Change ☐ Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: