

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 680697

1. Entity Name

RICHARD G. ALLEN ARCHITECTS, INC.

**FILED**  
**Apr 25, 2001 8:00 am**  
**Secretary of State**

04-25-2001 90005 045 \*\*\*150.00

Principal Place of Business

3847 S SCHOOL AVE  
SARASOTA FL 34239  
US

Mailing Address

% JOHN PATTERSON, ESQ..  
46 NORTH WASHINGTON BLVD., SUITE 1  
SARASOTA FL 34236

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 59-2017698

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

ALLEN, RICHARD G.  
3847 S SCHOOL AVE  
SARASOTA FL 34239

Name

PATTERSON, JOHN

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

46 N. WASHINGTON BLVD.

SUITE 1

City

SARASOTA

FL

Zip Code

34236

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

01/31/01

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 \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**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 D  
NAME ALLEN, RICHARD G.  
STREET ADDRESS 3847 S SCHOOL AVE  
CITY-ST-ZIP SARASOTA FL 34239 ☐ Delete

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

TITLE P  
NAME ALLEN, R G  
STREET ADDRESS 3847 S SCHOOL AVENUE  
CITY-ST-ZIP SARASOTA FL 34237 ☐ Delete

TITLE  
NAME ALLEN, R G JR. ☒ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ST  
NAME MORROW, J  
STREET ADDRESS 3847 S SCHOOL AVENUE  
CITY-ST-ZIP SARASOTA FL 34239 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN MORROW, Secretary/Treasurer

(941) 957-0030

Date

Daytime Phone #

CR2E034 (10/00)