

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 235618

1. Entity Name

JACK MUELLER & ASSOCIATES, INC.

FILED

Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90030 004 ***158.75

Principal Place of Business

Mailing Address

9450 SUNSET DRIVE
SUITE 200
MIAMI FL 33173

9450 SUNSET DRIVE
SUITE 200
MIAMI FL 33173-5428

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0902541

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MUELLER JR., JOHN W.
9450 SUNSET DRIVE, SUITE 200
MIAMI FL 33173

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

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, 2000 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 VP ☐ Delete
NAME TEAGARDEN, ROBIN D JR
STREET ADDRESS 9450 SUNSET DR STE 200
CITY-ST-ZIP MIAMI FL 33173

TITLE Assistant Secretary ☐ Change ☒ Addition
NAME Kimberly A. Johnson
STREET ADDRESS 9450 Sunset Drive - Ste 200
CITY-ST-ZIP Miami, Florida 33173

TITLE PDT ☐ Delete
NAME MUELLER JR, JOHN W
STREET ADDRESS 9450 SUNSET DR
CITY-ST-ZIP MIAMI, FL 00000

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

TITLE S ☐ Delete
NAME MUELLER, SUSAN A
STREET ADDRESS 9450 SUNSET DR
CITY-ST-ZIP MIAMI, FL 00000

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

TITLE V ☐ Delete
NAME MURPHY, PATRICK J
STREET ADDRESS 9450 SUNSET DR
CITY-ST-ZIP MIAMI, FL 00000

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

TITLE AS ☐ Delete
NAME LOWE, LAURIE J
STREET ADDRESS 9450 SUNSET DRIVE, SUITE 200
CITY-ST-ZIP MIAMI FL

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

TITLE VP ☐ Delete
NAME MORGENROTH, THOMAS
STREET ADDRESS 9450 SUNSET DR., STE 200
CITY-ST-ZIP MIAMI FL 33173

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 all other like empowered.

SIGNATURE:

~~SIGNATURE REQUIRED~~

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John W. Mueller, Jr., President

04-13-00

(305) 279-5555

Date

Daytime Phone #

CR25034 10/00