

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **324253**

Entity Name

J.D.BYRD ENTERPRISES, INC.

Principal Place of Business

**1805 JEFFERSON AVE.
FT. MYERS FL 33901**

Mailing Address

**1805 JEFFERSON AVE.
FT. MYERS FL 33901**

FILED

01 JUL 18 AM 9:11

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1205655

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

**BYRD, RACHEL C.
1805 JEFFERSON AVE
FORT MYERS FL 33901**

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 \$550.00
After September 12, 2001 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 ☐ Delete
NAME **PTD**
STREET ADDRESS **BYRD, RACHEL**
CITY-ST-ZIP **1805 JEFFERSON AVE.
FORT MYERS FL**

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

TITLE ☐ Delete
NAME **VSD**
STREET ADDRESS **PRATOR, BONNIE**
CITY-ST-ZIP **1805 JEFFERSON AVE.
FORT MYERS FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-11-01

Date

941-936-7282

Daytime Phone #

CR2E034 (5/01)

Attachment
Hissam and Associates, Inc.

Doc. # 324253 2002

1937 Grace Avenue
Post Office Box 1570
Fort Myers, Florida 33902

Phone: (941) 939-0661
Fax: (941) 939-7931
Email: dlh@hissam.com

July 11, 2001

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

Gentlemen:

Enclosed please find a check for \$150.00 from J.D. Byrd Enterprises, Inc. This payment is for the Uniform Business Report (UBR) for 2001. We respectfully request that you accept this report as being timely filed and abate the additional fee of \$400. We request this for the following reason; the sole shareholder, Mrs. Rachel C. Byrd, has lost her eye sight at age 84. Due to her deteriorating eye sight when the original notice was received, it was simply misplaced or over looked.

J.D. Byrd Enterprises, Inc. was incorporated in 1971 and has been current with all State filings for the past 30 years. Please contact us if we can be of any additional assistance.

Very truly yours,



Don L. Hissam
Accountant

DLH:cc