

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 525140

1. Entity Name

MAURY L. CARTER AND ASSOCIATES, INC.

FILED
Apr 26, 2000 8:00 am
Secretary of State

04-26-2000 90180 018 ***150.00

Principal Place of Business Mailing Address
908 S. DELANEY AVE. (ZIP 32806-1275) 908 S. DELANEY AVE. (ZIP 32806-1275)
P.O. BOX 568821 P.O. BOX 568821
ORLANDO FL 32856-5821 ORLANDO FL 32856-8821
US

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 59-1726675 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

CARTER, MAURY L.
908 S DELANEY AVENUE
ORLANDO FL 32806

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

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	DC	<input type="checkbox"/> Delete
NAME	CARTER, MAURY L	
STREET ADDRESS	908 S DELANEY AVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	O'BRIEN, ROBERT E	
STREET ADDRESS	908 S DELANEY AVE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WRAY, PAMELA L.	
STREET ADDRESS	908 S DELANEY AVE.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	SDP	<input type="checkbox"/> Delete
NAME	CARTER, DARYL M.	
STREET ADDRESS	908 S. DELANEY AVENUE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	AT	<input type="checkbox"/> Delete
NAME	WRIGHT, ROBERT B	
STREET ADDRESS	209 OHIO AVE	
CITY-ST-ZIP	ST. CLOUD FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Maury L. Carter, Director

Apr 19 00

Date

407/422-3144

Daytime Phone #

CR2E034 (9/99)

325140

Attachment

719783

Additional Sheet

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2000 UNIFORM BUSINESS REPORT

2000

MAURY L CARTER & ASSOC INC

(Note: The following officer(s)/director(s) was/were omitted
from the 2000 UBR

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:

<u>No</u>	<u>Description</u>	<u>Information</u>	<u>Status: Addition</u>
7.1.	TITLE	V	
7.2.	NAME	Douglas, Jeffrey Randolph	
7.3.	ADDRESS	415 Ivanhoe Blvd	
7.4.	CITY-ST-ZIP	Orlando FL 32804	
