

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 590423

1. Entity Name  
BARCLAY ASSOCIATES, INC.

Principal Place of Business  
572 NW 11TH AVE  
BOCA RATON FL 33486-3461

Mailing Address  
572 NW 11TH AVE  
BOCA RATON FL 33486-3461

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 59-2051840

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

SMITH, DAVID B.  
572 NW 11TH AVE  
BOCA RATON FL 33432

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

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 NAME ☐ Delete  
PTD SMITH, JEFFREY B A  
STREET ADDRESS 572 NW 11TH AVE  
CITY-ST-ZIP BOCA RATON, FL 00000

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

TITLE NAME ☐ Delete  
VSD SMITH, DAVID B  
STREET ADDRESS 572 NW 11TH AVE  
CITY-ST-ZIP BOCA RATON, FL 00000

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

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

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CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition  
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: DAVID B. SMITH 8/27/01 1-561-394-6641  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**FILED**  
**Sep 05, 2001 8:00 am**  
**Secretary of State**  
09-05-2001 90003 018 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

6/5/2000 AV

CR2E034 (5/01)

*Barclay Associates Inc* <sup>Du#</sup>

572 N.W. 11th. Ave.  
Boca Raton, Fl. 33486

1 561-394-6641  
1-561-279-6126(C)

590423  
80063383

August 27, 2001  
Florida Department of State  
Division of Corporations  
P.O. Box 32314  
Tallahassee, Florida 32314

*Division of Corporations,*

*During the routine of paying corporate bills this morning I discovered in paying the 2001 Uniform Business Report that there is an excessively large penalty due because this fee was due before May 1, 2001. Neither my accountant nor I have any record of having received the original statement from your office.*

*I immediately phoned your office and was advised to write this letter and send it accompanied with the remittance of \$150.*

*I thank you for your consideration in the matter of either unsent or lost mail*

*Sincerely*



*David B. Smith*