

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 604583

1. Entity Name
ROY LEWIS, P.A.

Principal Place of Business

203 WASHINGTON STREET
JACKSONVILLE FL 32202

Mailing Address

203 WASHINGTON STREET
JACKSONVILLE FL 32202

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 59-1475102

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

LEWIS, ROY
203 WASHINGTON ST
JACKSONVILLE FL

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, 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
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
LEWIS, ROY
203 WASHINGTON ST
JACKSONVILLE FL ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
LEWIS, ANN
203 WASHINGTON ST
JACKSONVILLE FL 32202 ☐ Delete

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

TITLE
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CITY-ST-ZIP
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☐ 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

5/15/01

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

ROY LEWIS, P.A.

Dear Madam,

Attachment
#6004583
768211

5/15/01 1165

Please excuse the delay. I was out of town and when I returned my secretary told me that the VBR was under some papers and she did not know it was there. As soon as she informed me of this, I immediately called your office and was advised by Susan to send it in and

ROY LEWIS, P.A.

I would not be assessed a penalty. I have never been late in filing in my thirty years as a Corporation. I appreciate your consideration and kindness.

Roy Lewis