2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 6 19 385 1. Entity Name BOYD AND BRANCH, P.A. 01 SEP -6 PM 4: 55 Mailing Address Principal Place of Business SECRETARY OF STATE 1407 Piedmont Drive East P. O. Box 14267 Tallahassee, FL.32317 Tallahassee, FL 32308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1904715 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Boyd, Joseph R. Street Address (P.O. Box Number is Not Acceptable) 1407 Piedmont Drive East Tallahassee, FL 32308 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) FILE NOWIN FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of Sta ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete MLE ■ Addition NAME NAME Boyd, Joseph R. STREET ADDRESS STREET ADDRESS 1407 Piedmont Drive East CITY-ST-ZIP CITY-ST-ZIP Tallahssee, FL Delete TITLE TITLE Chance ☐ Addition S NAME NAME Wm. Scott Lindsey STREET ADDRESS STREET ADDRESS 1407 Piedmont Drive East CITY-ST-ZIP CITY-ST-ZIP Tallahassee, FL ☐ Delete 000004573**0%**08\*\*\* TITLE TITLE MAR -09/07/01--01001--011 STREET ADDRESS STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE ☐ Addition TITLE Delete Change MALIF STREET ADDRESS STREET ADDRESS CITY-ST-79 CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-29 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 Statutas. I further certify that the information indicated on this report or suppliemental 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:

BICHTURE OUT TOR THE THE BEST SIGNING OFFICER OR DIRECTOR

386-2171

Law Firm of Boyd, Lindsey, Branch & Sliger, P.A.

1407 PIEDMONT DRIVE EAST TALLAHASSEE, FLORIDA 32312 (850) 386-2171 FAX (850) 385-4936 e-mail: BoydBranch@aol.com

REPLY TO: Post Office Box 14267 TALLAHASSEE, FLORIDA 32317

September 6, 2001

## VIA HAND DELIVERY

Mr. Doug Spitler **Division of Corporation** State of Florida Tallahassee, Florida

RE: Boyd & Branch, P. A.

Dear Doug:

Please find enclosed subject company's 2001 Uniform Business Report plus a filing fee of \$150.00. As we discussed, we hereby request a waiver of the penalty as we did not receive a Report in the mail. Thanks for your help.

Sincere

Scott Lindsey

WSL/sbb

**Enclosures**