2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State
03-12-2001 90444 028 ***150.00

DOCUMENT # 669776

1. Entity Name
LEE JAY COLLING & ASSOCIATES, P.A.

Principal Place of Business	Mailing Address
1920 E ROBINSON ST ORLANDO FL 32803 US	1920 E ROBINSON ST ORLANDO FL 32803 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
682 Maitland Ave.	682 Maitland Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Altamonte Springs FL	City & State: Altamonte Springs FL
Zip: 32701 Country: USA	Zip: 32701 Country: USA

4. FEI Number 59-2009846 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

COLLING, LEE JAY
1920 E ROBINSON ST
ORLANDO FL 32803

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 682 Maitland Avenue
City Altamonte Springs FL Zip Code 32701

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] LEE JAY COLLING 3/1/01
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	PDS COLLING, LEE JAY 1920 E ROBINSON ST ORLANDO FL 32803 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PDS COLLING, LEE JAY 682 Maitland Ave Altamonte Springs, FL 32701 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/00)

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] LEE JAY COLLING 3/1/01 407-834-7500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #