

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90086 043 ***158.75

DOCUMENT # 674668

1. Entity Name

~~INGLEY, CAMPBELL, MOSES AND ASSOCIATES, INC.~~

N/C 2/5/01

Change to: Moses & Associates, Inc

Principal Place of Business

2209 NW 40TH TERR
STE A
GAINESVILLE FL 32605

Mailing Address

2209 NW 40TH TERR
STE A
GAINESVILLE FL 32605

80043330



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number: 59-2006400

Applied For

Not Applicable

Zip

Country

Zip

Country

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

INGLEY, HERBERT A III
3228 NW 57TH TERRACE
GAINESVILLE FL 32605

Name

Francis W. Moses

Street Address (P.O. Box Number is Not Acceptable)

2209 NW 40th Terrace

Suite A

City

Gainesville

Zip

32605

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

Francis W. Moses, PRESIDENT

FRANCIS W. MOSES

4/3/01

Signature, typed or printed name of registered agent and the filing date

(NOTE: Registered Agent's signature required when reissuing)

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	PD	☒ Delete
NAME	INGLEY, HERBERT A III	
STREET ADDRESS	3228 N.W. 57 TERRACE	
CITY-STATE-ZIP	GAINESVILLE, FL 0	
TITLE	VST	☐ Delete
NAME	MOSES, FRANCIS W	
STREET ADDRESS	1523 N W 52ND TERR	
CITY-STATE-ZIP	GAINESVILLE, FL 32605	
TITLE	DV	☒ Delete
NAME	CAMPBELL, ARTHUR V.	
STREET ADDRESS	3044 S.W. 70TH LANE	
CITY-STATE-ZIP	GAINESVILLE FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	President	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	Vice-President	☐ Change ☒ Addition
NAME	George R. Lebo	
STREET ADDRESS	1504 NW 11th Road	
CITY-STATE-ZIP	Gainesville, FL 32605	
TITLE	Secy/Treasurer	☐ Change ☒ Addition
NAME	Andrew C. West	
STREET ADDRESS	1518 NW 4th Avenue, Apt B	
CITY-STATE-ZIP	Gainesville FL 32603	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-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:

Francis W. Moses

FRANCIS W. MOSES

4/3/01

(352)372-1911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)