

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 10, 2003 8:00 am
Secretary of State

09-10-2003 90064 039 ***158.75

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DOCUMENT # 692847

1. Entity Name
JOHN A. BARLEY & ASSOCIATES, P.A.



Principal Place of Business
**4927 HEATHE DRIVE
TALLAHASSEE FL 32309**

Mailing Address
**4927 HEATHE DRIVE
TALLAHASSEE FL 32309**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

Zip

Country

Zip

Country

4. FEI Number **59-2095802**

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

**BARLEY, JOHN A.
4927 HEATHE DRIVE
TALLAHASSEE FL 32308**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PST** ☐ Delete
NAME **BARLEY, JOHN A.**
STREET ADDRESS **4927 HEATHE DRIVE**
CITY-ST-ZIP **TALLAHASSEE FL 32308**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 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

Date

Daytime Phone #

John A. Barley, Resident 9/9/03 481-5307

CR2E034 (4/03)

Attachment

80146360
#692847

John A. Barley
4927 Heathe Drive
Tallahassee, Florida 32309

September 9, 2003.

Florida Department of State
Division of Corporations
Uniform Business Report
Post Office Box 1500
Tallahassee, Florida 32302-1500

Via U. S. Mail

Re: Annual Report for John A. Barley & Associates, P. A.

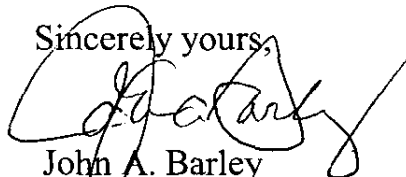
Dear Sir or Madam:

Enclosed is the 2003 Uniform Business Report for John A. Barley & Associates, P. A., with my check for \$158.75 to pay the fee applicable to filing the Report, and for obtaining a certificate of status.

I failed to file the Report by May 1, 2003, because I did not have the deadline for filing the Report noted on my calendar, did not independently remember when it was due, and did not receive a notice to file the Report until recently receiving the one that prompted me file the Report enclosed with this letter. Accordingly, I ask that you excuse my failure to file by May 1, 2003, and to accept the enclosed Report as timely filed for 2003.

Thank you for your attention to this matter and for favorably considering my request in the foregoing respects.

Sincerely yours,


John A. Barley
President