

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F00000000547

1. Entity Name

HEWITT, COLEMAN & ASSOCIATES, INC.

Principal Place of Business

850 S. PLEASANTBURG DRIVE
GREENVILLE SC 29607

Mailing Address

850 S. PLEASANTBURG DRIVE
GREENVILLE SC 29607

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

PO Box 5500

City & State

City & State

Greenville SC

Zip

Country

Zip

Country

29606

USA

4. FEI Number

57-0297041

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE PSTD ☐ Delete
NAME WARNE, CHARLES R
STREET ADDRESS 850 SOUTH PLEASANTBURG DRIVE
CITY-ST-ZIP GREENVILLE SC

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
CITY-ST-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 or 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-6-01

864-240-5800

FILED
01 JUL 16 PM 5:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

0133464 AT

CF-E034 (5/01)

F 00000000547

(2)

HEWITT, COLEMAN & ASSOCIATES, INC.

RISK RETENTION SPECIALISTS SINCE 1923

FILED
01 JUL 11/6 PM 5:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 6, 2001

Division of Corporations
Personal & Confidential
Attn: Buck Kohr
P O Box 6327
Tallahassee FL 32314

Buck:

We did not receive our initial notice for the 2001 UBR. Therefore I am enclosing a check in the amount of \$150.00 for the filing fee only. I have added to this form our mailing address. Hopefully this will help in the future.

Thank you,

Faye Love

Faye Love
Accounting Department

Enclosure

7/16

