

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2003 8:00 am
Secretary of State

02-25-2003 90118 015 ***150.00

DOCUMENT # F01000000817

1. Entity Name
WILLIAM SWITZER & ASSOCIATES, INC.



Principal Place of Business
1855 GRIFFIN RD. C420
DANIA FL 33004

Mailing Address
6-611 ALEXANDER ST.
VANCOUVER. BC V6A 1E1

90036236



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **98-0157610**

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

WISE, WAYNE T
1855 GRIFFIN RD, STE C-420
DANIA BEACH FL 33004

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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	P	<input type="checkbox"/> Delete
NAME	SWITZER, RENEE	
STREET ADDRESS	6-611 ALEXANDER ST.	
CITY-ST-ZIP	VANCOUVER BC V6A- 1E1	
TITLE	V	<input type="checkbox"/> Delete
NAME	SWITZER, ALLAN Z	
STREET ADDRESS	6-611 ALEXANDER ST.	
CITY-ST-ZIP	VANCOUVER BC V6A-1E1	
TITLE	S	<input type="checkbox"/> Delete
NAME	KETTLER, PETER	
STREET ADDRESS	6-611 ALEXANDER ST.	
CITY-ST-ZIP	VANCOUVER BC V6A- 1E1	
TITLE	CD	<input type="checkbox"/> Delete
NAME	SWITZER, WILLIAM	
STREET ADDRESS	6-611 ALEXANDER ST.	
CITY-ST-ZIP	VANCOUVER BC V6A- 1E1	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (10/02)

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 recipient of 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:

REQUIRED

02/10/2003

604255-5911

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #