

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2003 8:00 am
Secretary of State

0118986 AT

DOCUMENT # F02000005829

1. Entity Name
MITCHELL-PECK NAPLES, INC.



Principal Place of Business
**806 WELSH RD.
HUNTINGTON VALLEY PA 19006**

Mailing Address
**806 WELSH RD.
HUNTINGTON VALLEY PA 19006**

10111433



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **55-0794264**

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

**MITCHELL, KATHLEEN
1144 THIRD STREET SOUTH
NAPLES FL 34102**

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 \$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 NAME STREET ADDRESS CITY-ST-ZIP	CDPT MITCHELL, KATHLEEN 2043 SUSQUEHANNA RD. ABINGTON PA 19001	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCDV PECK, PHILIP 2043 SUSQUEHANNA RD. ABINGTON PA 19001	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

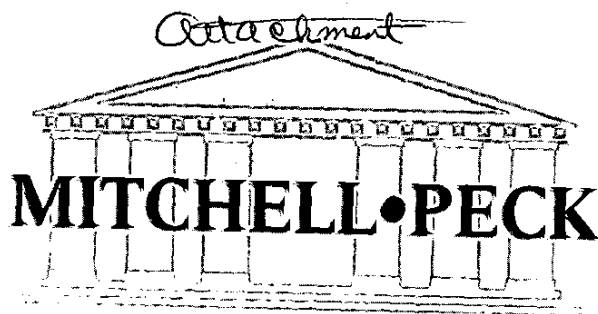
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP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

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:

Kathleen Mitchell **Kathleen Mitchell** 9/1/03 25-260-5004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)



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F03000005829

9-1-03

Dear Sirs -

We are a very small corporation of 4 employees. We manufacture in Penna. and opened a gallery to sell our pieces in Florida. Our accountants advised us to incorporate in Penna. and we did.

We recently ended our relationship with the accountant and can find no previous notice of this fee. He also cannot find a check to UBR for our fee. My mother is our bookkeeper and has searched everything.

I am enclosing a check for \$150 filing fee and hope this letter will be accepted notice that we did not receive a prior request.

Sincerely, Kathleen Mitchell

Office
2043 SUSQUEHANNA ROAD • ABINGTON, PA 19001
Studio
806 OLD WELSH ROAD • HUNTINGDON VALLEY, PA 19006
V:(215)885-9618 F:(215)914-0756