

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 29, 2000 8:00 am
Secretary of State
 02-29-2000 90179 026 ***150.00

DOCUMENT # F20123

1. Entity Name

GUY H. AMASON, JR., P.A.

Principal Place of Business

**13161 MCGREGOR BLVD
 FT MYERS FL 33907**

Mailing Address

**13161 MCGREGOR BLVD
 FT MYERS FL 33907**

2. Principal Place of Business

3992 Villmoor Lane, S. W.

3. Mailing Address

3992 Villmoor Lane, S. W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Myers, Florida

City & State

Fort Myers, Florida

4. FEI Number

59-2077049

Applied For

Not Applicable

Zip

33919

Country

Lee

Zip

33919

Country

Lee

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**AMASON, GUY H., JR
 13161 MCGREGOR BLVD
 SUITE F
 FORT MYERS FL 33919**

7. Name and Address of New Registered Agent

Name

GUY H. AMASON, JR.

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

3992 Villmoor Lane, S. W.

City

Fort Myers

FL

Zip Code

33919

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

(NOTE: Registered Agent signature required when reinstating)

DATE

2/12/00

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, 2000 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

TITLE **DPV** ☐ Delete
 NAME **AMASON, GUY H, JR**
 STREET ADDRESS **13161 MCGREGOR BLVD**
 CITY-ST-ZIP **FT MYERS, FL 00000**

TITLE **TS** ☐ Delete
 NAME **AMASON, GUY H, JR**
 STREET ADDRESS **13161 MCGREGOR BLVD**
 CITY-ST-ZIP **FT MYERS, FL 00000**

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPV** ☐ Change ☐ Addition
 NAME **GUY H. AMASON, JR.**
 STREET ADDRESS **3992 Villmoor Lane, S.W.**
 CITY-ST-ZIP **Fort Myers, Florida 33919**

TITLE **TS** ☐ Change ☐ Addition
 NAME **GUY H. AMASON, JR.**
 STREET ADDRESS **3992 Villmoor Lane, S.W.**
 CITY-ST-ZIP **Fort Myers, Florida 33919**

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

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

TITLE ☐ Change ☐ Addition
 NAME
 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 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(941) 481-4834

2/12/00