

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90012 020 ***150.00

DOCUMENT # F43755

1. Entity Name

ACCOUNTING ASSOCIATES OF FORT WALTON, INC.

Principal Place of Business

~~P.O. BOX 696~~
~~201 HOLLYWOOD BLVD NE~~
~~FT. WALTON BEACH FL 32548~~
~~US-~~

Mailing Address

~~P.O. BOX 696~~
~~201 HOLLYWOOD BLVD NE~~
~~FT. WALTON BEACH FL 32549~~

2. Principal Place of Business

306 CYPRESS ST
Suite, Apt. #, etc.

3. Mailing Address

306 CYPRESS ST.
Suite, Apt. #, etc.

City & State

DESTIN, FLORIDA

City & State

DESTIN, FLORIDA

Zip

32541

Country

OKALOOSA

Zip

32541

Country

OKALOOSA

4. FEI Number 59-2108010

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

Name

~~LUTHER, FRANCES S.~~
~~201 HOLLYWOOD BLVD NE~~
~~FT. WALTON BEACH FL 32548~~

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

306 CYPRESS ST.

City DESTIN,

FL

Zip Code
32541

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 \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME LUTHER, FRANCES S.
STREET ADDRESS PO BOX 696
CITY-ST-ZIP FT. WALTON BCH FL 32549

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 306 CYPRESS ST
CITY-ST-ZIP DESTIN, FL. 32541

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME SEC/TREAS D
STREET ADDRESS LOUIS E. LUTHER
CITY-ST-ZIP 306 CYPRESS ST
DESTIN, FL. 32541

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCES S. LUTHER, PRES. 4-16-01 243 6101

Date

Daytime Phone #

CR2E034 (10/00)