2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2003 8:00 am
Secretary of State
07-18-2003 90074 041 ***150.00

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DOCUMENT # F57698

1. Entity Name
TAX ACCOUNTING, INC.

Principal Place of Business	Mailing Address
% NORMAN A. HERREN, JR. 1068 SIXTH AVE. N. NAPLES FL 33940	% NORMAN A. HERREN, JR. 1068 SIXTH AVE. N. NAPLES FL 33940

2. Principal Place of Business	3. Mailing Address
5011 TAMIAMI TRAIL EAST	5011 TAMIAMI TRAIL E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: NAPLES, FL	City & State: NAPLES, FL
Zip: 34113 · Country: ~~COLLIER~~ USA	Zip: 34113 · Country: ~~COLLIER~~ USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2139977 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

HERREN, NORMAN A., JR
1252 ILLINOIS DR
NAPLES FL ~~33940~~

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code NEW ZIP 34103

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] 7/11/03
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	PD HERREN, NORMAN A JR 1252 ILLINOIS DRIVE NAPLES FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (4/03)

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: [signature] NORMAN A. HERREN, JR. 7/11/03 NEW AREA CODE 239-263-5051
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

Attachment

P01144391

TAX ACCOUNTING, INC.
5011 TAMIAMI TRAIL EAST
NAPLES, FLORIDA 34113
~~(941)~~ 239 263-5051 • FAX ~~(941)~~ 239 263-4578

July 11, 2003

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Uniform Business Report for 2003
Tax Accounting, ~~Inc.~~
Document # F57698

Dear Sir:

We moved our offices and did not receive the original mailing of your packet. The new owner at our prior address did not notify us of its receipt. He did, however, notify us that this second mailing was received.

Because our late filing was inadvertent, we ask that the penalty be waived.

Thank you for your consideration.

Sincerely,

Norman A. Herren, Jr. EA
Registered Agent