

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 02, 2002 8:00 am
Secretary of State

10-02-2002 90120 049 ***150.00

DOCUMENT # F94000005513

1. Entity Name
WM. PAGE & ASSOCIATES, INC.

Principal Place of Business
**2810 E. OAKLAND PARK BLVD.
 SUITE 300
 FT LAUDERDALE FL 33306**

Mailing Address
**2810 E. OAKLAND PARK BLVD.
 SUITE 300
 FT LAUDERDALE FL 33306**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 34-1722615	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

**PAGE, WILLIAM S.
 2810 E. OAKLAND PARK BLVD.
 SUITE 300
 FT LAUDERDALE FL 33306**

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 NAME STREET ADDRESS CITY-ST-ZIP	DPST PAGE, WILLIAM S 2810 EAST OAKLAND PARK BLVD., SUITE 300 FORT LAUDERDALE FL 33306 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PAGE, WILLIAM S 2810 EAST OAKLAND PARK BLVD., SUITE 300 FORT LAUDERDALE FL 33306 <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"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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
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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: _____ **NOTARIAL SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/30/02 *954588-8658*
 Date Daytime Phone #

CR2E034 (4/02)

PAGE

& associates, inc.™

Attachments

2810 East Oakland Park Boulevard, Suite 300

Fort Lauderdale, Florida 33306

Phone (954) 568-3658

Fax (954) 568-5970

September 30, 2002

678751
794000055B

Florida Department of State
Division of Corporations
Uniform Business Reports
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: WM. Page & Associates, Inc.
Form: 2002 Uniform Business Report

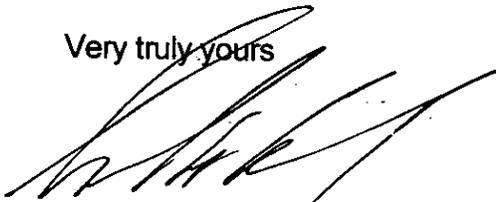
Dear Sir or Madam:

Enclosed is our uniform Business that we were dismayed to learn had not been filed on a timely basis. Please be advised that this is the first time we have been late in filing the report. Our bookkeeper has been in and out of the office due to illness; however, we have instituted better controls to prevent future reporting problems. There was certainly no intent to circumvent the filing requirements.

We have enclosed with the report a check for \$150 and respectfully request the abatement of any late filing penalties due to reasonable cause.

Thank you in advance for your cooperation in handling this matter.

Very truly yours



Wm. Scott Page
Wm. Page & Associates, Inc.
President