

# 2000 UNIFORM BUSINESS REPORT (UBR)

9/11/00-90016-011-\$150.00-\$150.00

1 of 2

DOCUMENT # F99000003206

1. Entity Name

ROGERS & CO., CPA'S, P.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT -2 AM 7:20

Principal Place of Business

100 EAST OLD COUNTRY ROAD  
MINEOLA NY 11501

Mailing Address

100 EAST OLD COUNTRY ROAD  
MINEOLA NY 11501

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

11-3301097

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MUSCO  
MUSCO, STEPHEN M  
1549 RINGLING BLVD., #602  
SARASOTA FL 34236

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.

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CP ROGERS, ERIC J 100 EAST OLD COUNTRY ROAD MINEOLA NY 11501	<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
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"/> 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

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-2-00

Date

516-741-4766

Daytime Phone #

CP2E034 (5/00)

AD

## ROGERS & COMPANY CPA'S P.C.

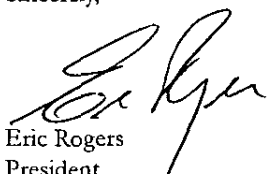
September 23, 2000

Annual Reports Section  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Annual Reports Section,

We respectfully appeal the abatement of the late filing penalty being imposed upon our company. It seems that you had our address incorrect and the mail was not forwarded to suite 6. We did not receive the Uniform Business Report. Our CPA firm specializes in tax exempt entities and does not prepare tax returns and was not aware of this mandatory filing. Additionally this is the first year that we had to file this report. We pledge to correctly file this return in a timely manner in future periods.

Sincerely,



Eric Rogers  
President  
Rogers & Company