

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90430 039 ***155.00

DOCUMENT # F99000003767

1. Entity Name

ROY L. AACH AND ASSOCIATES, P.C.



Principal Place of Business

806 OAK POND DR

OSPREY FL 34229

Mailing Address

806 OAK POND DR

OSPREY FL 34229

2. Principal Place of Business

2207 OAK FORD ROAD

3. Mailing Address

2207 OAK FORD ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SARASOTA, FL. 34240

City & State

SARASOTA, FL. 34240

4. FEI Number

43-1487231

Applied For

Not Applicable

Zip

34240

Country

USA

Zip

34240

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AACH, ROY L

806 OAK POND DR.

OSPREY FL 34229

7. Name and Address of New Registered Agent

Name

AACH, ROY L.

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

2207 OAK FORD ROAD

SARASOTA, FL. 34240

City

SARASOTA

FL

Zip Code
34240

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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 PCD ☐ Delete
NAME **AACH, ROY L**
STREET ADDRESS **806 OAK POND DR**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE PCD ☒ Change ☐ Addition
NAME **AACH, ROY L.**
STREET ADDRESS **2207 OAK FORD ROAD**
CITY-ST-ZIP **SARASOTA, FL. 34240**

TITLE S ☐ Delete
NAME **AACH, BEVERLY W**
STREET ADDRESS **806 OAK POND DR**
CITY-ST-ZIP **OSPREY FL 34229**

TITLE S ☒ Change ☐ Addition
NAME **AACH, BEVERLY W.**
STREET ADDRESS **2207 OAK FORD ROAD**
CITY-ST-ZIP **SARASOTA, FL. 34240**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROY L. AACH, PRES.

1/8/03

(941)

342-0206

Date

Daytime Phone #

CR2E034 (10/02)