

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2002 8:00 am
Secretary of State

03-19-2002 90018 020 ***150.00

DOCUMENT # G57475

1. Entity Name

JOSEPH H. FORBES, P.A.

Principal Place of Business

**1810 NW 6TH ST
 STE C
 GAINESVILLE FL 32609
 US**

Mailing Address

**PO BOX 913
 GAINESVILLE FL 32602
 US**

2. Principal Place of Business

PO Box 913

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Gainesville, FL

City & State

4. FEI Number

59-2317297

Applied For

Not Applicable

Zip
32602

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**FORBES, JOSEPH H
 1810 NW 6TH STREET
 STE C
 GAINESVILLE FL 32609**

7. Name and Address of New Registered Agent

Name

Franklin, Jan C.

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

537 NE 1st St., Ste. 4

City

Gainesville

FL

Zip Code

32601

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

Jan C. Franklin Registered Agent

3/6/02

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, 2002 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

TITLE **PD** ☐ Delete
 NAME **FORBES, JOSEPH H.**
 STREET ADDRESS **1810 NW 6TH ST, STE C**
 CITY-ST-ZIP **GAINESVILLE FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **Forbes, Joseph H.**
 STREET ADDRESS **PO Box 913**
 CITY-ST-ZIP **Gainesville, FL 32602**

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

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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 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:

JOSEPH H. FORBES, Pres. 3/6/02 352-375-4375

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)