

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H12894

1. Entity Name

ROBERT H. BOYD, INC.

FILED
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90161 041 ***150.00

Principal Place of Business

7575 DR. PHILLIPS BLVD.
390
ORLANDO FL 32819
US

Mailing Address

7575 DR. PHILLIPS BLVD.
390
ORLANDO FL 32819
US

905500



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7586 W. SAND LAKE ROAD

3. Mailing Address

7586 W. SAND LAKE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO, FL

4. FEI Number

59-2460027

Applied For

Not Applicable

Zip

32819

Country

US

Zip

32819

Country

US

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BOYD, ROBERT H
7575 DR. PHILLIPS BLVD
STE. 390
ORLANDO FL 32819

7. Name and Address of New Registered Agent

Name

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

7586 W. SAND LAKE ROAD

City

ORLANDO

FL

Zip Code

32819

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 \$150.00
After MAY 1, 2001 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 ☐ Delete
NAME DP
STREET ADDRESS BOYD, ROBERT H.
CITY-ST-ZIP 200 WYNDEMERE WAY, SUITE 205B
NAPLES FL 34105

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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:

Robert H. Boyd Robert H. Boyd

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/2001

Date

407-352-4868

Daytime Phone #

941-261-0166

CR2E034 (10/00)