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FILED

Jun 26, 2001 8:00 am
Secretary of State

05-16-2001 90414 043 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H74920

1. Entity Name

PETER J. WERNER LTD., INC.

Principal Place of Business
3709 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405Mailing Address
3709 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405

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 59-2602710

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

WERNER, PETER J. James R. Hale
3709 SOUTH DIXIE HIGHWAY
WEST PALM BEACH FL 33405

7. Name and Address of New Registered Agent

Name James R. Hale
Street Address (P.O. Box Number is Not Acceptable)3709 South Dixie Highway
City West Palm Beach FL Zip Code 33405

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

James R. Hale

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

(NOTE: Registered Agent signature required when reappointing)

DATE

6.21.01

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	VS	<input checked="" type="checkbox"/> Delete
NAME	WOOD, TERRY	
STREET ADDRESS	2060 HIDDEN LAKE DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	DPT	<input checked="" type="checkbox"/> Delete
NAME	WERNER, PETER J.	
STREET ADDRESS	3709 S. DIXIE HWY.	
CITY-ST-ZIP	WEST PALM BCH. FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Pres.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James R. Hale	
STREET ADDRESS	3709 South Dixie Hwy.	
CITY-ST-ZIP	West Palm Beach, FL 33405	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

James R. Hale James R. Hale

Date

Daytime Phone #

CR2E034 (10/00)