

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H77010

1. Entity Name
QUINN & QUINN, INC.

Principal Place of Business

5955 MASTERS BLVD
ORLANDO FL 32819
US

Mailing Address

% JANE B. QUINN
5955 MASTERS BLVD.
ORLANDO FL 32819
US

2. Principal Place of Business

17527 COBBLESTONE LANE

Suite, Apt. #, etc.

3. Mailing Address

17527 COBBLESTONE LANE

Suite, Apt. #, etc.

City & State

CLERMONT, FLORIDA

Zip

34711

Country

US

City & State

CLERMONT, FLORIDA

Zip

34711

Country

US

4. FEI Number

59-2579973

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUINN, JANE B.

5955 MASTERS BLVD
ORLANDO FL 32819

Name

QUINN, JANE B

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

17527 COBBLESTONE LANE

City

CLERMONT

FL

Zip Code

34711

7. Name and Address of New Registered Agent

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

Jane B. Quinn (JANE B. QUINN)

1-7-2002

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 DP
NAME QUINN, JANE B.
STREET ADDRESS 5955 MASTERS BLVD
CITY-ST-ZIP ORLANDO FL

☐ Delete

TITLE DV
NAME QUINN, EDWARD H.
STREET ADDRESS 5955 MASTERS BLVD
CITY-ST-ZIP ORLANDO FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 17527 COBBLESTONE LANE
CITY-ST-ZIP CLERMONT, FLORIDA 34711

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS 17527 COBBLESTONE LANE
CITY-ST-ZIP CLERMONT, FLORIDA 34711

☒ Change

☐ Addition

TITLE
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☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ 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:

Edward H. Quinn

EDWARD H. QUINN

Date

1/7/2002

Daytime Phone #

407-656-9989

FILED
Jan 08, 2002 8:00 am
Secretary of State

01-08-2002 90018 009 ***158.75



DO NOT WRITE IN THIS SPACE

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