

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H80985

1. Entity Name

Q. GRADY MINOR AND ASSOCIATES, P.A.

Principal Place of Business

3800 VIA DEL REY
BONITA SPRINGS FL 34134
US

Mailing Address

3800 VIA DEL REY
BONITA SPRINGS FL 34134
US

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 59-2583954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MINOR, Q. GRADY
3800 VIA DEL REY
BONITA SPRINGS FL 34134

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MINOR, Q. GRADY
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Delete

TITLE VD
NAME SANDOVAL, ERIC V.
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Change ☐ Addition

TITLE VD
NAME MINOR, MARK W.
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Delete

TITLE VD
NAME ARNOLD, D. WAYNE
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS, FL ☐ Change ☐ Addition

TITLE STD
NAME MINOR, NANCY
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Delete

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

TITLE VD
NAME ROSEMAN, ALAN V.
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Delete

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

TITLE ~~VD~~
NAME ~~THINNES, ROBERT W~~
STREET ADDRESS ~~3800 VIA DEL REY~~
CITY-ST-ZIP ~~BONITA SPRINGS FL~~ ☒ Delete

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

TITLE VD
NAME SMITH, C. DEAN
STREET ADDRESS 3800 VIA DEL REY
CITY-ST-ZIP BONITA SPRINGS FL ☐ Delete

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:

Q. Grady Minor

Q. GRADY MINOR

3/26/01

9419471144

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0400413



DO NOT WRITE IN THIS SPACE

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