2001 UNIFORM BUSINESS REPORT (UBR) FILED Aug 07, 2001 8:00 am Secretary of State H81338 DOCUMENT # 1. Entity Name JAMES A. SCOTT JR., P.A. 08-07-2001 90013 033 ***150.00 Principal Place of Business Mailing Address C/O JAMES A. SCOTT. JR. C/O JAMES A. SCOTT, JR. 4440 N OCEAN SHORE BLVD #109 4440 N OCEAN SHORE BLVD #109 PALM COAST FL 32137 PALM COAST FL 32137 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 59-2588999 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCOTT, JAMES A., JR. Street Address (P.O. Box Number is Not Acceptable) 4440 N OCEANSHORE BLVD. #109 PALM COAST FL 32137 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 12, 2001 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (5/01) TITLE ☐ Delete TITLE ☐ Change Addition SCOTT, JAMES A., JR .--NAME 107 OCEAN GROVE DR STREET ADDRESS STREET ADDRESS **ORMOND BEACH FL 32176** CiTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP -TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

13. I hereby certify that the information supplied with the 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 of the 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 expowered be 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:

SIZZATURE PEQUIRED

8-2-01

Daytime Phone #

LAW OFFICE OF JAMES A. SCOTT, JR., P.A.

4440 North Oceanshore Blvd., #109
Palm Coast, Florida 32137
(386) 445-7567
FAX (386) 445-6920

Attachment # H 81338 774417

July 30, 2001

State of Florida, Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Florida 32302-1500

Re: Late Filing for James A. Scott, Jr.,P.A. Document # H81338

Dear Sir/Madam:

As per my conversation with the office of Division of Corporations this morning I am enclosing the Uniform Business Report along with a check in the amount of \$150.00.

I was told to explain why the payment is late in a letter. My explanation for the late filing is that I never received the first notice. The only one that came to the office is the one with a due date of September 12, 2001. I honestly thought the due date was changed, however it was brought to my attention yesterday that I was in error.

Please accept my apology and thank you for your understanding in this matter.

Sincerely,

Erika Scott/Bookkeeper