

2003 **FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2003 8:00 am
Secretary of State

05-14-2003 90132 039 ***150.00

DOCUMENT # **H 82579**

1. Entity Name

ANDREA A. RUFF, PROFESSIONAL ASSOCIATION



DO NOT WRITE IN THIS SPACE

90134161

2. Principal Place of Business

1205 MT. VERNON ST.

3. Mailing Address

Suite, Apt. #, etc.

City & State

ORLANDO, FLA

City & State

4. FEI Number

59-2597493

Applied For

Not Applicable

Zip

32803

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

ANDREA A. RUFF

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

1205 MT. VERNON ST.

City

ORLANDO

FL

Zip Code

32803

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**PSI
ANDREA A. RUFF
1205 MT. VERNON ST.
ORLANDO, FLA 32803**

TITLE

NAME

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CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANDREA A. RUFF
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/09/03

Date

(407) 858-6700

Daytime Phone #

CR2E034B (12/02)

90134161

Attachment 504

WE DID NOT RECIVE THIS DOCUMENT ^{4/25/03}
AT ALL THIS YEAR AT THE CURRENT SAME
ADDRESS. WE HAD TO CALL AND REQUEST
A BLANK ONE, WE ARE SENDING THE
ORIGINAL FEE, BECAUSE WE NEVER
RECEIVED ANY NOTICES

THANK YOU