

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H87330

1. Entity Name

PEEL COMMUNICATIONS INCORPORATED

Principal Place of Business

324 VICTORIA AVENUE  
FORT WALTON BEACH FL 32548

Mailing Address

324 VICTORIA AVENUE  
FORT WALTON BEACH FL 32548

2. Principal Place of Business

210 Pelham Rd

3. Mailing Address

210 Pelham Rd

Suite, Apt. #, etc.

B-118

Suite, Apt. #, etc.

B-118

City & State

Ft. Walton Beach

City & State

Ft. Walton Beach

Zip

32547

Country

OKALOOSA

Zip

32547

Country

OKALOOSA

6. Name and Address of Current Registered Agent

PEEL, JIMMY  
6 WALTER MARTIN RD.  
FORT WALTON BEACH FL 32548

7. Name and Address of New Registered Agent

Name Peel, Jimmy  
Street Address (P.O. Box Number is Not Acceptable) 210 - Pelham Rd. UNIT B-118  
City Ft. Walton Beach FL Zip Code 32547

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 Jimmy C. Peel  
Signature, typed or printed name of registered agent and title if applicable.

Jimmy C. Peel  
(NOTE: Registered Agent signature required when reinstating)

4-24-01  
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

TITLE ☐ Delete  
NAME D  
STREET ADDRESS PEEL, JIMMY C  
CITY-ST-ZIP 324 VICTORIA AVENUE  
FT WALTON BCH FL 32548

TITLE ☐ Delete  
NAME DST  
STREET ADDRESS PEEL, KATHRYN A  
CITY-ST-ZIP 324 VICTORIA AVENUE  
FT WALTON BCH FL 32548

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME D  
STREET ADDRESS Jimmy C. Peel  
CITY-ST-ZIP 210 - Pelham Road - UNIT B118  
FT Walton Beach, FL 32547

TITLE ☐ Change ☐ Addition  
NAME DST  
STREET ADDRESS Peel, Kathryn A.  
CITY-ST-ZIP 210 - Pelham Road UNIT B-118  
FT. Walton Beach, FL 32547

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

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

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

TITLE ☐ Change ☐ 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: Kathryn A. Peel Kathryn Peel 4-24-01 850-277-0893  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
Apr 30, 2001 8:00 am  
Secretary of State

04-30-2001 90446 015 \*\*\*150.00

00043330



DO NOT WRITE IN THIS SPACE

0467739

CR2E034 (10/00)