

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 06, 2002 8:00 am**  
**Secretary of State**

08-06-2002 90129 025 \*\*\*150.00

**DOCUMENT # H90427**

1. Entity Name  
**T. GRAY FRAZIER, ARCHITECT, AIA, P.A.**

Principal Place of Business <b>137 E. CRYSTAL LAKE AVE          LAKE MARY FL 32746</b>	Mailing Address <b>137 E. CRYSTAL LAKE AVE          LAKE MARY FL 32746</b>
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DO NOT WRITE IN THIS SPACE

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 <b>59-2610364</b>	Applied For
	Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**FRAZIER, GRAY T**  
**137 E. CRYSTAL LAKE AVE**  
**LAKE MARY FL 32746**

**7. Name and Address of New Registered Agent**

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

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PV FRAZIER, GRAY T 502 OAKLAND TERRACE LAKE MARY FL</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PV T.GRAY FRAZIER 137 E. CRYSTAL LAKE AVE. LAKE MARY, FL 32746</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:** **T. GRAY FRAZIER** **7.31.2002** **407-324-7423**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment  
Doc. # H90427  
676375

TGF



ARCHITECTS

137 E. CRYSTAL LAKE AVE. LAKE MARY, FL 32746  
407 324 7423 AA 0002501

August 1, 2002

Division of Corrections  
Uniform Business Report Filings  
P O Box 1500  
Tallahassee, FL 32303-1500

RE: T. Gray Frazier, Architect, AIA, PA  
#H90427

Dear Sirs:

I reviewed the 2002 Uniform Business Form (UBR) 7-2002. This is the first notice I have received concerning the filing. I have been informed that this notice was mailed in January. I've relocated my office (5-2000) and have had some difficulty in receiving my mail. I assure you that the late filing (after 6-2002) was unintentional and request a waiver of the late filing fee (\$400).

I am enclosing a check for \$150.00 to correct this situation. Your consideration in this matter is greatly appreciated.

Sincerely,

T.G. FRAZIER

T. Gray Frazier  
TGF Architects