

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2002 8:00 am
Secretary of State
 02-10-2002 90051 024 ***150.00

DOCUMENT # H97698

1. Entity Name
QUAIL RIDGE DIVERSIFIED, INC.

Principal Place of Business
3583 QUAIL RIDGE
BOYNTON BEACH FL 33436

Mailing Address
3583 QUAIL RIDGE *Drive*
BOYNTON BEACH FL 33436

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 **36-3438757**

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

GOELZ, JOHN R.
3583 QUAIL RIDGE
BOYNTON BEACH FL 33436

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, 2002 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 **P** ☐ Delete
NAME **GOELZ, JOHN R.**
STREET ADDRESS **3583 QUAIL RIDGE DR.**
CITY-ST-ZIP **BOYNTON BEACH FL**

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

TITLE **S** ☐ Delete
NAME **GOELZ, ROBERT**
STREET ADDRESS **1765 CARRIAGE CT.**
CITY-ST-ZIP **GREEN BAY WI**

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

TITLE **T** ☐ Delete
NAME **GOELZ, RICHARD**
STREET ADDRESS **2325 HARMEL ROAD**
CITY-ST-ZIP **HARMEL MN**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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: *John R. Goelz* **REQUIRED** *Dr John R. Goelz M.D.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)



Florida Intangible Personal Property Tax Notice for 2002

Corporate and Partnership Filers

Doc# 497698
404077

You will NOT be mailed a tax return packet this year.

Why? Your filing history indicates you may not owe tax in 2002.

Use this worksheet to verify that you do not owe tax.

Tax Calculation Worksheet	
Enter Total Taxable Intangible Assets	\$ <i>none</i>
Multiply by Tax Rate	x .001
Total Tax Due	\$ <i>none</i>

If your Total Tax Due is less than \$60, you do not have to pay tax.

Notify the Department of your zero (0) tax obligation.

Corporations, partnerships, and affiliated groups are required to notify the Department of a zero tax obligation. Information reports are also required if you choose to pay as agent for your shareholders.

Beginning with the 2002 tax year, the Department will accept an electronic notification in lieu of a paper filing, if no tax is due.



From your touchtone phone, dial
1-800-550-6713 and follow the prompts.



Go to www.myflorida.com/dor, click on the
e-Services icon, and follow the prompts.

If your Total Tax Due is \$60 or more, you need to file Form DR-601C and pay the tax due.

You may obtain the return and instructions at www.myflorida.com/dor

Need forms mailed to you?

Order forms at: www.myflorida.com/dor/forms

Fax your request to 850-922-2208.

Call the DOR Distribution Center at 850-488-8422.

Mail your form request to:

Distribution Center
Florida Department of Revenue
168A Blountstown Hwy
Tallahassee FL 32304-3702

Need Assistance?

To speak with a Department of Revenue representative, call Taxpayer Services, Monday through Friday, 8 a.m. to 7 p.m., ET, at 1-800-352-3671 (in Florida only) or 850-488-6800.

Hearing or speech impaired persons may call the TDD line at 1-800-367-8331 or 850-922-1115.