2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J16036

1. Entity Name

RAY JOHNSON & ASSOCIATES, P.A.

Principal Place of Business

Mailing Address

FILED
Jan 28, 2000 8:00 am
Secretary of State
01-28-2000 90170 006 ***150.00

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232 EAST HILLCREST STREET ORLANDO FL 32801			232 EAST HILLCREST STREET ORLANDO FL 32720-3503						-	-	
	ace of Business Alexander [rive	3. Mailing Address 1640 Alexander Drive								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State DeLand	ギレ・		4. F	El Number	59-26735	42	├	pplied For lot Applicabl
Zip 327	Country Yolu	Sick	Zip 32720	Count	ีนรเล _{IX}	5. (Certificate of	Status Desired		\$8.75 Ac Fee Requir	
	6. Name and Addres	s of Current Re	gistered Agent		Name	7. N	lame and Ad	dress of New	Registered	Agent_	
	MANTEURDEÉT SÍV				Name	<u>, , , , , , , , , , , , , , , , , , , </u>					
JOHNSON, EVERETT RAY 1640 ALEXANDER DR DELAND FL 32720			Stre		Street Addre	Street Address (P.O. Box Number is Not Acceptable)					
DEG	110 1 E 02 1 E 0				City				FI	Zip Co	de
R The above	named entity submits thi	s statement for th	e purpose of changing it	ts registers	nd office or rea	istered and	ent or both i	n the State of f			
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SIGNATURE _										<u></u>	····
	Signature, typed or printed name of	of registered agent and	title il applicable. (NC	OTE: Registered	Agent signature re	quired when re	instating)		DATE		
Tax filing re	ration is eligible to satisfy equirement and elects to la on back)	_	FILE NOW After MAY 1, 2 Make Check Pays	2000 Fee v			ı	on Campaign f Fund Contribut	-		00 May Be ed to Fees
Tax filing re	equirement and elects to la on back)	da sa.	After MAY 1, 2 Make Check Paya	2000 Fee v	will be \$550.	State	Trust I		ion.	L Àdde	ed to Fees
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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 appears, with all other like empowered.

SIGNATURE:

1-23-00