

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J57137

1. Entity Name
T W RICH SERVICES, INC.

FILED
May 25, 2001 8:00 am
Secretary of State

05-25-2001 90288 032 ***558.75

553969



DO NOT WRITE IN THIS SPACE

Principal Place of Business
8765 U.S. 1
SEBASTIAN FL 32976

Mailing Address
8765 U.S. 1
SEBASTIAN FL 32976

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 65-0012479

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

RICH, THOMAS
8765 U.S. 1
SEBASTIAN FL 32976

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.

(NOT)

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
After MAY 1, 2001
Make Check Payable to Department of State

FEE IS \$150.00
Fee will be \$550.00
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
NAME RICH, THOMAS
STREET ADDRESS 8765 U.S. 1
CITY-ST-ZIP SEBASTIAN FL

☐ Delete

TITLE D
NAME RICH, CLERANCE
STREET ADDRESS 10443 W BETHANY RD
CITY-ST-ZIP E BETHANY NY

☐ Delete

TITLE VPST
NAME MIDDLETON, BARBARA
STREET ADDRESS 116 KARRIGAN ST
CITY-ST-ZIP SEBASTIAN FL 32958

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CITY-ST-ZIP

☐ Change ☐ 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 I am an officer or director of the corporation or the receiver or trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS D. RICH
PRES.
03/14/01
561.664.4325

03/14/01

Date

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)