

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 04, 2001 8:00 am
Secretary of State

06-04-2001 90014 005 ***550.00

0154826

DOCUMENT # K34885

1. Entity Name

HALSEY & BURNS, P.A.

Principal Place of Business

**200 S BISCAYNE BLVD
 SUITE 4980
 MIAMI FL 33131-309
 US**

Mailing Address

**200 S BISCAYNE BLVD
 SUITE 4980
 MIAMI FL 33131-309
 US**

2. Principal Place of Business

11325 S.W. 70 Ave.

3. Mailing Address

11325 S.W. 70 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, FL

City & State

Miami, FL

Zip

33156

Country

Zip

33156

Country

4. FEI Number

65-0075009

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HALSEY, DOUGLAS M.
 11325 SW 70 AVE
 MIAMI FL 33156**

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.

SIGNATURE

Douglas M. Halsey

Douglas M. Halsey, President

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

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PVT** ☐ Delete
 NAME **HALSEY, DOUGLAS M.**
 STREET ADDRESS **11325 SW 70 AVE**
 CITY-ST-ZIP **MIAMI FL**

TITLE **V** ☒ Delete
 NAME **BURNS, KIRK L**
 STREET ADDRESS **1720 FERDINAND ST**
 CITY-ST-ZIP **CORAL GABLES FL**

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
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
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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 empowerments.

SIGNATURE:

Douglas M. Halsey

Douglas M. Halsey, 305-661-5353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)