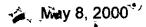
2000 UNIFORM BUS	INESS REPO	RT	(UBR)						
DOCUMENT # K 59836  1. Entity Name DACIFIC FINANCIAL ASSOCIATES INC. P.O. Box 292667, TAMPA, FL 33687					FILED  OOMAY ID PM 1: 40				
Principal Place of Business P.O.BOX 292661 TAMPA, PL 33687	Mailing Address P.O.BOX 292667 TAMPA, FL 33687			SEGRETARY OF STATE TALLAHASSEE, FLORIDA					
2. Principal Place of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.	Suite, Apt. #, etc.		<u> </u>		DO NOT WE	RIȚE IN THIS S	PACE		
City & State	City & State			4. FEI Number Applied For Not Applicable					
Zip Country	Zip	Country			icate of Status Desired		No. <b>\$8.75</b> Add Fee Required		
6. Name and Address of Current	Registered Agent			7. Name	and Address of New	Registered A	gent		
M.J. SMITH			Name 			1			
6406 E FOWLER AVENUE SUITE A			Street Address (P.O. Box Number is Not Acceptable)						
TEMPLE TERRACE, FL 3361			City			, , , , , , , , , , , , , , , , , , ,			
	·					FL Zip Code			
8. The above named entity submits this statement for	or the purpose of changing its	registere	ed office or register	red agent, o	or both, in the State of F	lorida.		ļ	
SIGNATURE	and title if applicable. (NOTE	E: Registered	Agent signature required	d when reinstatin	ng)	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, 20 Make Check Payab	00 Fee	will be \$550.00		). Election Campaign F Trust Fund Contributi			O May Be to Fees	
TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME	☐ Delete	CITY- TITLE NAMM STRE CITY- TITLE NAMM STRE CITY- TITLE NAMM STREI NAMM STREI	E ET ADDRESS ST-ZIP E ET ADDRESS ST-ZIP E ET ADDRESS ST-ZIP E ET ADDRESS ST-ZIP E ET ADDRESS		100003 -06/05 *****1	1	☐ Change	☐ Addition   6   6   6   6   6   6   6   6   6	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP  13. I hereby certify that the information supplied with indicated on this report or supplemental report of the corporation or the receiver or trueted empchanged, or on an attachment with an address,  SIGNATURE:	e true and accurate and that no owered to execute this report	CITY- TITLE NAME STREE CITY- The exerny signate	ET ADDRESS -ST-ZIP	same legal 7, Florida St	effect as it made unde	roath; that I a	ım an officer	or airector [	
M.J. SMITH AURICE STOP	RINFED NAME OF SIGNING OFFICER	OR DIRECT	OR		Date	. D	aytime Phone #		



Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## Dear Representative:

I talked with Ms. Hampton today about a heartbreaking problem my wife, Karen, and I have. Ms. Hampton said you would work with us if we wrote and explained the situation to you. Karen and I have small corporations here in Florida. We have had them for years.

Karen's father, Wilbur, died March 2, 2000 and our lives have been turned upside down ever since. Wilbur's death was sudden. Karen got a call that Thursday night that will change our lives forever. Wilbur had suffered a heart attack and was taken to Pasco Regional Medical Center. We rushed from Tampa but got there too late.

Wilbur had died at 7:08 p.m. I won't ever forget how Karen and I broke down and sobbed when the doctor told us in the small pastor's room that Wilbur was dead. We didn't even get to say good-bye. We still have nightmares about it.

We immediately had to turn our grief to dealing with Karen's stepmother, Martjie, and her living arrangement. She suffers from memory lapses, is 89, and can't take care of herself. We also had to make many trips back and forth from Tampa to Zephyrhills to assist with Martjie and taking care of Wilbur's house.

Because of the heartbreak, strain and turmoil during with Wilbur's death, we overlooked the prompt filing of our annual report (Uniform Business Report, as you know call it). We are honest, God-fearing people and we have always filed on time in the past.

During all of this turmoil, we must have misplaced our annual notice. We called Ms. Hampton as soon as we discovered we had missed the date and requested new forms. They arrived on Monday, May 8, 2000. I immediately got the checks ready and prepared this letter.

Sir or madam, I don't ask for much. But I am asking for some compassion here. Could you waive the late fee and accept our enclosed payments of \$150 each for our corporation filing fee. We can't afford the extra \$800. It would put a hardship on us at a time when Karen's and my physical and mental condition is very fragile.

Thank you and God bless you for your kind and compassionate consideration. This is a one-time situation. Please contact me at (813) 980-3939 if you have any questions.

Sincerely

Jeff Smith

P.O. Box 292667

Tampa, Florida 33687-2667