## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jul 19, 2000 8:00 am Secretary of State **DOCUMENT # L01272** 1. Entity Name PEIRCE & ASSOCIATES, INC. 07-19-2000 90154 003 \*\*\*150.00 Principal Place of Business Mailing Address 1443 20TH STREET P.O. BOX 520 SUITE F VERO BEACH FL 32961-0520 VERO BEACH FL 32960 2. Principal Place of Business 3. Mailing Address 915 Old Dixie Hwy. 915 Old Dixie Hwy. S.W. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Vero Beach, FL Applied For City & State 4. FEI Number 65-0132731 Vero Beach, FL Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32962 USA 32962 Fee Required USA 7. Name and Address of New Registered Agent - 6. Name and Address of Current Registered Agent Name HENDRIX, C. KENNON, ESQ. Street Address (P.O. Box Number is Not Acceptable) **1443 20TH STREET** SUITE F VERO BEACH FL 32960 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. 7. z. ? ./10 ☐ Addition ☐ Change TITLE ☐ Delete BIBO, WILLIAM A NAME NAME STREET ADDRESS 915 OLD DIXIE HWY SW STREET ADDRESS CITY-ST-ZIP VERO BEACH FL CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE PEIRCE, MARK D. NAME STREET ADDRESS 915 OLD DIXIE HWY SW STREET ADDRESS CITY-ST-ZIP CITY-SY-ZIP VERO BEACH FL Delete" -DST-TITLE ĪIBE PEIRCE, DALE E. NAME NAME STREET ADDRESS 915 OLD DIXIE HWY SW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF VERO BEACH FL ☐ Change ☐ Addition TITLE Oelete TITLE PEIRCE, GARY S. NAME NAME STREET ADDRESS STREET ADDRESS 915 OLD DIXIE HWY SW CITY-ST-7IP CITY-ST-ZIP **VERO BEACH FL** ☐ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P Delete ☐ Change Addition TITLE NAME STREET ADDRESS 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:

July 7, 2000



Division of Corporations Uniform Business Report Filings P. O. Box 1500 Tallahassee, FL 32302-1500

Re: Document #L01272 FEI 65-0132731

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To Whom It May Concern:

I am in receipt of to 2000 Uniform Business Report (2<sup>nd</sup> Notice). Please be advised that this office never received the original or first notice. The notice just received is the only notice this office has received.

I have enclosed a check for \$150.00. Thank you for your cooperation.

Sincerely,

Dale E. Peirce

DEP/jk