

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L51383

1. Entity Name

SONNIE WILLIAM, P.A.

FILED
Aug 11, 2000 8:00 am
Secretary of State

08-11-2000 90048 001 ***400.00

08-11-2000 90048 002 ***150.00

Principal Place of Business

115 HIDDEN OAK DR
LONGWOOD FL 32779

Mailing Address

115 HIDDEN OAK DR
LONGWOOD FL 32779-4905

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 59-2998035

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

WILLIAM, SONNIE
115 HIDDEN OAK DR.
LONGWOOD FL 32779

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.

(NOTE: 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!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable 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
NAME
STREET ADDRESS
CITY - ST - ZIP
D
WILLIAM, SONNIE
115 HIDDEN OAK DR
LONGWOOD FL ☐ Delete

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

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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 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: *Sonnie William*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/00

Date

407-788-1613

Daytime Phone #

CR2E034 (9/99)

Doc # L51383

19470

July 12, 2000

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

Re: Sonnie William P.A.
FEI No. 59-2998035
Doc # L51383

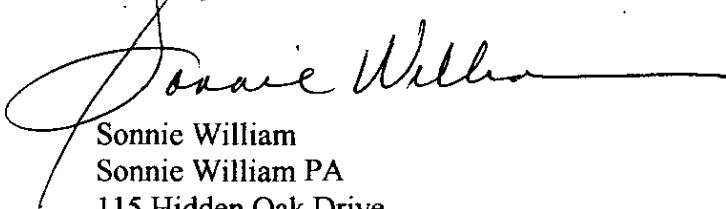
Gentlemen:

I'm very distressed to write this letter, in lieu of the fact that I missed filing this very important document on time.

My accountant included this 2000 Uniform Business Report (UBR) form with my various tax forms that were due, and unfortunately this form was missed by me, and filed away with the 1999 tax reports, unpaid. I have always paid my fee early and am upset that this wasn't paid on time. I am herewith enclosing the form and a check in the amount of \$150.00 hoping this will be acceptable.

Thank you in advance for your consideration,

Sincerely,



Sonnie William
Sonnie William PA
115 Hidden Oak Drive
Longwood, Fl. 32779
407-788-1613
FAX 407-788-0282