

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
May 21, 2003 8:00 am
Secretary of State

05-21-2003 90189 013 ***150.00

0660563 AV

DOCUMENT # L54946

1. Entity Name
FLANAGAN & MENCHINGER, P.A.



Principal Place of Business
**% JOHN R. FLANAGAN, CPA
2831 RINGLING BLVD. SUITE 204-B
SARASOTA FL 34237**

Mailing Address
**% JOHN R. FLANAGAN, CPA
2831 RINGLING BLVD. SUITE 204-B
SARASOTA FL 34237**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number **65-0115870**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**FLANAGAN, JOHN R.
2831 RINGLING BLVD
SUITE 204-B
SARASOTA FL 34237**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable. DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

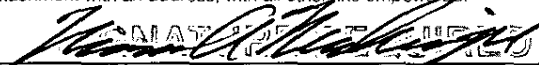
10. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> Delete
NAME	FLANAGAN, JOHN R.
STREET ADDRESS	2831 RINGLING BLVD
CITY-ST-ZIP	SARASOTA FL
TITLE	D <input type="checkbox"/> Delete
NAME	MENCHINGER, THOMAS A.
STREET ADDRESS	2831 RINGLING BLVD
CITY-ST-ZIP	SARASOTA FL
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **5/19/03** Daytime Phone #: **941-366-5646**

CFR2E034 (10/02)

Attachment
FLANAGAN & MENCHINGER

90137210
#254946

CERTIFIED PUBLIC ACCOUNTANTS, P.A.

2831 RINGLING BOULEVARD • SUITE 204 B • SARASOTA, FLORIDA 34237 • (941) 366-5646

MESSAGE

REPLY

TO WHOM IT MAY CONCERN
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DATE 5/19/03

%o DEAR SIR OR MADAM:

PLEASE EXCUSE THIS LATE FILING. I HAD THOUGHT
I HAD TAKEN CARE OF THIS SOME MONTHS AGO, BUT
EVIDENTLY IT GOT BURNED ON MY DESK DURING OUR
TAX FILING SEASON.

THANK YOU FOR YOUR CONSIDERATION.

Sincerely

THOMAS A. MENCHINGER

SIGNED _____

SIGNED _____

INSTRUCTIONS TO SENDER:
1. KEEP CANARY COPY 2. SEND WHITE AND PINK COPIES WITH CARBON INTACT.
%o INDICATES FOLD MARK FOR #10 WINDOW ENVELOPE

INSTRUCTIONS TO RECEIVER:
1. WRITE REPLY 2. DETACH STUB, KEEP PINK COPY, RETURN WHITE COPY TO SENDER.