

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M63709

1. Entity Name

REGALIA, INC.

Principal Place of Business

Mailing Address

3081 O'BRIEN DRIVE
TALLAHASSEE FL 32308
US

3491-11 THOMASVILLE RD., #171
TALLAHASSEE FL 32312

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHERIDAN, GLORIA J
3491-11 THOMASVILLE ROAD #171
TALLAHASSEE FL 32308

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 re-registering)

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, 2001 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 PVS
NAME SHERIDAN, GLORIA J
STREET ADDRESS 3491-11 THOMASVILLE RD., #171
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

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

TITLE T
NAME SHERIDAN, GLORIA J
STREET ADDRESS 3491-11 THOMASVILLE #171
CITY-ST-ZIP TALLAHASSEE FL ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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: *Gloria J. Sheridan*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-29-01 850-668-2886

Date

Daytime Phone #

07-05-2001 90009-041-***150.00

FILE # 63709

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL 23 PM 4:20

AUU75560



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0027798

Applied For
Not Applicable

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

CR2E034 (10/00)

SP

REGALIA



REGALIA, INC.
3491-11 Thomasville Road-171
Tallahassee, Florida 32308
Ph: 850 668-2886 Fax: 850 668-2884

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23 July, 2001

Mr. Jay Kassees
Director, Division of Corporations
Fax 245-6014

Dear Mr. Kassees.

I am writing regarding my company's Uniform Business Report. Our report was not filed until the 29 of June, 2001, as we did not receive our notice for filing until after the deadline of May 1, 01.

I would appreciate it if the matter could be taken care of so that we do not have to pay a penalty for late filing.

If you have any questions, you can reach me at the above address.

Sincerely.

Gloria Sheridan

Gloria Sheridan
President
Regalia, Inc.