

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 13, 2000 8:00 am  
Secretary of State

09-13-2000 90058 012 \*\*\*558.75

DOCUMENT # M89594

1. Entity Name

NEIL WEIN & ASSOCIATES, INC.



Principal Place of Business

13121 EASON ISLAND COURT  
JACKSONVILLE FL 32224

Mailing Address

13121 EASON ISLAND COURT  
JACKSONVILLE FL 32224

A0077583



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1301 South First Street

3. Mailing Address

1301 South First Street

Suite, Apt. #, etc.

#206

Suite, Apt. #, etc.

#206

City & State

JACKSONVILLE BEACH, FLA

City & State

JACKSONVILLE BEACH, FLA

4. FEI Number

65-0057345

Applied For

Not Applicable

Zip

32250

Country

U.S.A.

Zip

32250

Country

U.S.A.

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

WEIN, NEIL

13121 EASON ISLAND COURT  
JACKSONVILLE FL 32224

Name

WEIN, NEIL

Street Address (P.O. Box Number is Not Acceptable)

1301 South First Street #206

City

JACKSONVILLE BEACH, FL

Zip Code

32250

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: Neil Wein NEIL WEIN President

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

(NOTE: Registered Agent signature required when reinstating)

9/9/00

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 \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**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

TITLE PD  
NAME WEIN, NEIL  
STREET ADDRESS 13121 EASON ISLAND COURT  
CITY-ST-ZIP JACKSONVILLE FL 32224 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition  
NAME WEIN, NEIL  
STREET ADDRESS 1301 South First Street #206  
CITY-ST-ZIP JACKSONVILLE BEACH, FLA 32250

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

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

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

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

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: Neil Wein NEIL WEIN President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/9/00

DATE

904-247-1915

DAYTIME PHONE #

CR1E034 (5/00)