

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 19, 2001 8:00 am
Secretary of State

07-19-2001 90236 032 ***150.00

0076424 AV

DOCUMENT # P00000002677

1. Entity Name

CHARLES B. MEAD, JR., P.A.

Principal Place of Business

**370 W. CAMINO GARDENS BLVD., STE. 300
BOCA RATON FL 33432**

Mailing Address

**370 W. CAMINO GARDENS BLVD., STE. 300
BOCA RATON FL 33432**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

-Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

593619368

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

MEAD, CHARLES B JR

**370 W. CAMINO GARDENS BLVD., STE. 300
BOCA RATON FL 33432**

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 \$500.00
After September 12, 2001 Fee 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 ☐ Delete
NAME **D MEAD, CHARLES B JR ESQ**
STREET ADDRESS **370 W. CAMINO GARDENS BLVD., STE. 300**
CITY-ST-ZIP **BOCA RATON FL 33432**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-11-01 (561) 362-6677

CR2E034 (5/01)

Attachment

A0078520

Doc. # J09380

Carlos H. Castellon, M.D., P.A.
Rt. 13 Box 372
Lake City, Florida 32055-9090

July 5, 2001

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

Dear:

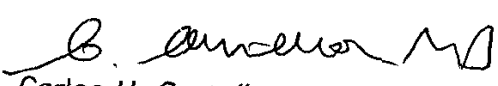
Since there was a delay on filing this report last year and we had to pay \$550.00 for late filing. We sent in this year report the moment we received it.

However now we get a notice again for \$550 for late filing, evidently you did not receive our report?

As per our telephone conversation we are enclosing a check for \$150.00 and requesting that the \$550.00 late filing charge be waived.

Thank you very much.

Sincerely,


Carlos H. Castellon, M.D.
President

CHARTER

CHARTER OF THE STATE OF FLORIDA

Attachment
Charles B. Mead, Jr.
Attorney at Law

A000519

Doc. # P0000000267

July 11, 2001

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

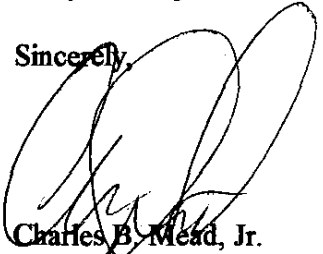
Re: 2001 UBR
Document #: P00000002677

Dear Sir/Madam:

Enclosed please find my check, check number 3682, in the amount of \$150.00. These monies represent the filing fee for my P.A..

I did not receive any notice in January of this year to pay my filing fee. Accordingly, I kindly ask that you accept this as if filed in January. Thank you.

Sincerely,


Charles B. Mead, Jr.
CBM/t