

2002 **103** **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000012830

1. Entity Name

ADAIR DISTRIBUTING, INC.

FILED
03 JUN 16 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

800 Laurel Oak Drive

3. Mailing Address

800 Laurel Oak Drive

Suite, Apt. #, etc.

Ste 200

Suite, Apt. #, etc.

Ste 200

City & State

Naples, FL

City & State

Naples, FL

Zip

34108

Country

Zip

34102

Country

4. FEI Number

65-0978961

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Adair, Kim

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

800 Laurel Oak Drive

Ste 200

City Naples

FL

Zip Code 34108

**DO NOT WRITE
IN THIS SPACE**

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

5/8/03

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	D ADAIR, TINA 771 18 STREET NE NAPLES, FL 34120	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ADAIR, KIM 771 18 STREET NE NAPLES, FL 34120	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/8/03

Date

239-403-1700

Daytime Phone #

CR2E034B (12/01)

**A BETTER
BUSINESS & TAX SERVICE, INC.**

Attachment

Lo# P000000012820

**A
CCURATE
ACCOUNTING & TAX, INC.**



May 8, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 34302-1500

Re: Adair Distributing, Inc.
800 Laurel Oak Drive, Ste 200
Naples, FL 34108
FEIN 65-0978961

Please find attached the annual reports for the year 2002 and 2003 for the above mentioned client. Also enclosed is a check in the amount of \$300 to cover the annual filing fees of \$150 per year.

Mr. Adair never received the annual reports for these years. Therefore, we request that any late fee for the years 2002 and 2003 be waived.

Any further questions regarding this matter can be directed to me at this office Monday through Friday, between the hours of 11:00 AM and 5:00 PM.

Sincerely,

Helen Watson

Helen Watson
President

HW/jaa

Attachments