

2001 UNIFORM BUSINESS REPORT (UBR)

112
2001
AV

DOCUMENT # P00000024772

1. Entity Name
TIM CHILDERS, P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 11 PM 5:53

Principal Place of Business
215 COSTELLO ROAD
WEST PALM BEACH FL 33405

Mailing Address
215 COSTELLO ROAD
WEST PALM BEACH FL 33405



2. Principal Place of Business
226 Ashworth St
Suite, Apt. #, etc.

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

DO NOT WRITE IN THIS SPACE

City & State
WPA FL
Zip 33405 Country

City & State
Zip Country

4. FEI Number
65-0993650

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

CHILDERS, TIM
5100 S. DIXIE HIGHWAY
SUITE 6
WEST PALM BEACH FL 33405

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

9-15-01

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 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD CHILDERS, TIM 215 COSTELLO ROAD WEST PALM BEACH FL 33405	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500004649845--2 -10/23/01--01044--008 *****150.00 *****150.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 employees.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-15-01 561 585-1911

CR2E034 (5/01)

ILLUSTRATED PROPERTIES
Real Estate, Inc.

www.ipre.com

Exclusive Agent of 2-



CHRISTIE'S
GREAT ESTATES

Sep 17/01,

To whom it may concern :

This is a letter of explanation
regarding the late payment of this bill.

After speaking with one of your reps on

Monday AM inquiring on why I had
not received my business report filing
it was determined it was sent to an old
address. I went to my old address and
the new homeowners had the filing papers.

Please accept my chk for \$150.00 /

cannot afford the late fee. My new

address is 226 Ashworth St WPB, FL 33405

Thank you,

Tim Childers

West Palm Beach

5100 S. Dixie Hwy., #6 • West Palm Beach, FL 33405 • (561) 588-2002 • (561) 585-6977 Fax