

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90174 007 ***150.00

DOCUMENT # P00000028604

1. Entity Name
LAW OFFICES OF ALLEN & ECHEMENDIA, P.A.



Principal Place of Business
**2910 WINTER LAKE ROAD
LAKELAND FL 33803**

Mailing Address
**2910 WINTER LAKE ROAD
LAKELAND FL 33803**

2. Principal Place of Business

3. Mailing Address

2920 WINTER LAKE RD

2920 WINTER LAKE RD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKELAND, FL

City & State

WINTER LAKE, FL

Zip

33803

Country

Zip

33803

Country

4. FEI Number

59-3630675

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ECHEMENDIA, RAFAEL J
2910 WINTER LAKE ROAD
LAKELAND FL 33803**

Name

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

2920 WINTER LAKE ROAD

City

LAKELAND

FL

Zip Code

33803

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **ALLEN, WILLIAM L**
STREET ADDRESS **2910 WINTER LAKE ROAD**
CITY-ST-ZIP **LAKELAND FL 33803**

☒ Change ☐ Addition
TITLE **2920 WINTER LAKE RD.**
NAME **LAKELAND, FL 33803**
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **ECHEMENDIA, RAFAEL J**
STREET ADDRESS **2910 WINTER LAKE ROAD**
CITY-ST-ZIP **LAKELAND FL 33803**

☒ Change ☐ Addition
TITLE **2920 WINTER LAKE RD.**
NAME **LAKELAND, FL 33803**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. 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 10 or Block 11 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

1/8/03
Date

863-669-1505
Daytime Phone #

CR2E034 (10/02)