

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90078 001 ***150.00

0165333 AV

DOCUMENT # P00000039277

1. Entity Name

V. MCFADYEN, P.A.

Principal Place of Business

420 FLEMING STREET
 KEY WEST FL 33040

Mailing Address

420 FLEMING STREET
 KEY WEST FL 33040

B0052650



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1824 Flagler Ave.
 Suite, Apt. #, etc.

3. Mailing Address

1824 Flagler Ave.
 Suite, Apt. #, etc.

City & State

Key West FL

City & State

Key West FL

4. FEI Number

65-1009989

Applied For

Not Applicable

Zip

33040

Country

Monroe

Zip

33040

Country

Monroe

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MCFADYEN, VICTORIA
 420 FLEMING STREET
 KEY WEST FL 33040

7. Name and Address of New Registered Agent

Name

Victoria McFadyen

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

1824 Flagler Ave.

City

Key West FL

FL

Zip Code

33040

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

Victoria McFadyen

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 PT
 NAME MCFADYEN, VICTORIA
 STREET ADDRESS 420 FLEMING ST
 CITY-ST-ZIP KEY WEST FL 33040 ☐ 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 PT
 NAME McFadyen Victoria
 STREET ADDRESS 1824 Flagler Ave
 CITY-ST-ZIP Key West FL 33040 ☒ 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

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:

Victoria McFadyen
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/02
 Date

(305) 295 3060
 Daytime Phone #

CR2E034 (9/01)