

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

DOCUMENT # P00000049314

1. Entity Name

EMPIRE FINANCIAL ASSOCIATES, INC.

FILED

03 FEB 10 AM 9:58

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2002-2003 UBR

2. Principal Place of Business

25 OLD KINGS ROAD, NORTH

3. Mailing Address

P. O. BOX 352501

Suite, Apt. #, etc.

SUITE 3B

Suite, Apt. #, etc.

City & State

PALM COAST, FL

City & State

PALM COAST, FL

4. FEI Number

59-3645870

Applied For

Not Applicable

Zip

32137

Country

USA

Zip

32135

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **GARY A. BLOOM**

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

25 OLD KINGS ROAD, NORTH #3B

City **PALM COAST**

FL

Zip Code
32137

**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

GARY A. BLOOM

01/24/2003

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

(NOTE: Registered Agent signature required when reissuing)

DATE

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 \$64.25
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

**P/D GARY A. BLOOM
25 OLD KINGS RD., NO. #3B
PALM COAST, FL 32137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**3000011593153
01/31/03--01061--007 **150.00**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**VP/D RANDOLPH W. WILLIAMS
25 OLD KINGS RD., NO. #3B
PALM COAST, FL 32137**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**3000011593153
02/11/03--01007--003 **450.00**

TITLE
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CITY - ST - ZIP

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CITY - ST - ZIP

**DO NOT WRITE
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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)(f), 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:

GARY A. BLOOM

01/24/2003 386 447 3797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)

DO NOT DETACH!

2 of 2

Empire Financial Associates, Inc.

P. O. Box 352501
Palm Coast, Florida 32135
(386) 846 9727

January 24, 2003

Secretary of State
Corporations
P. O. Box 6327
Tallahassee, Florida 32314

RE: UBR/reinstatement

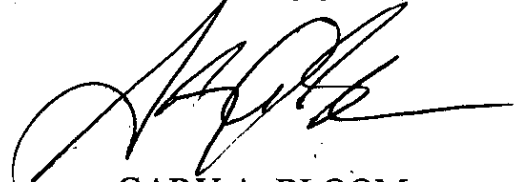
Gentlemen:

Enclosed please find a UBR for filing concerning Empire Financial Associates, Inc. I note that we never received the form notice and this may be attributable to the fact that we filed a forwarding to our post office box last year and the rural carrier has not always gotten all of the mail to the correct destination. In fact, things tend to straggle in with little or no predictability.

I enclose the customary fee of \$150.00 and respectfully request that any penalties or late fees be waived.

Thank you for your assistance and consideration in this matter.

Sincerely yours,



GARY A. BLOOM