

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000051399

1. Entity Name
EMORY INVESTMENTS, INC.



03 JUL 30 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

55050532

Principal Place of Business
106 LAKEVIEW TRAIL
MELROSE FL 32666

Mailing Address
P. O. BOX 390
MELROSE FL 32666

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3653494

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DOOLEY, SANDRA T
106 LAKEVIEW TRAIL
MELROSE FL 32666

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. 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 \$550.00

After September 10, 2003 Fee will be \$750.00
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

TITLE PT
NAME DOOLEY, SANDRA
STREET ADDRESS 106 LAKEVIEW TRAIL
CITY-ST-ZIP MELROSE FL 32666 ☐ Delete

TITLE VPS
NAME MATCHETT, DIANE
STREET ADDRESS 106 LAKEVIEW TRAIL
CITY-ST-ZIP MELROSE FL 32666 ☐ 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition
600022164346
08/08/03--01002--028 ***150.00

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

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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

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 Dooley, sus.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

352-475-1800

0128142 AT

CR2E034 (4/03)

EMORY INVESTMENTS, INC.
P.O. BOX 390
MELROSE, FL 32666
Phone (352) 475-1800

July 28, 2003

Sean Toner
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: UBR

Dear Sean Toner:

Enclosed, please find our 2003 UBR Report and fee of \$150.00. We have received your letter dated 7/10/03 regarding our filing of the UBR. I am requesting that you PLEASE waive the late fee as we were certain that we had already filed the report online. I did not realize until I received your letter that the confirmation we had in our 2003 file was for last year. A late fee of \$400 on a \$150 filing fee would really place an undue hardship on our small company. Thank you for your consideration.

Sincerely,



Sandra Dooley