

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 20, 2001 8:00 am**  
**Secretary of State**

08-20-2001 90072 032 \*\*\*150.00

0014947 AV

**DOCUMENT # P00000075623**

1. Entity Name  
**LOCKE CONSULTING, INC.**

Principal Place of Business

Mailing Address

**427 BONIFAY AVE.  
 ORLANDO FL 32825**

**427 BONIFAY AVE.  
 ORLANDO FL 32825**

2. Principal Place of Business

3. Mailing Address

**2103 HILL CANYON CT.**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**SUGAR LAND, TX**

**SUGAR LAND, TX**

Zip

Country

Zip

Country

**77479 USA**

**77479 USA**

4. FEI Number

**59-3663251**

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LOCKE, CYNTHIA D  
 427 BONIFAY AVE.  
 ORLANDO FL 32825**

Name

**RICK BOYLE**

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

**7217 E. COLONIAL DR.**

**SUITE #212**

City

**ORLANDO**

**FL**

Zip Code

**32807**

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

*Cynthia D Locke / President*

**8-11-01**

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 \$550.00**

**After September 12, 2001 Fee will be \$750.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing ☐

**\$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	PD LOCKE, CYNTHIA D 427 BONIFAY AVE. ORLANDO FL 32825	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LOCKE, CHARLES E 427 BONIFAY AVE. ORLANDO FL 32825	<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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2103 HILL CANYON CT. SUGAR LAND, TX 77479
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2103 HILL CANYON CT. SUGAR LAND, TX 77479
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 empowered.

SIGNATURE:

*Cynthia D Locke*

**8-11-01**

**713-383-7010**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment Doc # FO0000075623

A0082119

Locke Consulting, Inc.  
2103 Hill Canyon CT.  
Sugar Land, TX 77479

August 3, 2001

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida

Subject: Annual renewal of Corp.

Dear Florida Department of State:

I was recently informed that as a Sub-chapter S Corporation, we were supposed to file a form and pay a fee of \$150.00. As a new Corporation, I was not aware of this procedure. I changed our address with the IRS, but when I called you week before last, you still had our old business address, and I suppose that's why we never received a renewal form. Never having been in business before, I wasn't looking for a form, because I had no idea that I should have been expecting anything. I'm sending our check and I'd like to make sure our address is changed too. Our address is Locke Consulting, Inc., 2103 Hill Canyon CT., Sugar Land, TX. 77479, phone # 832-309-5725.

Please send all correspondence to this address. I want to make sure we're not missing any other forms that are supposed to be filed. We did pay a company to file for us, and being that we just started in October of last year, I didn't think we'd need to do anything so soon. I do apologize, and please keep me informed through our above address if there is anything else we should be filing.

Thank you for your time.

Cynthia Locke, president

*Cynthia Locke*