

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

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90148 007 ***150.00

DOCUMENT # **P0000000 84295**

1. Entity Name

MARY HEDRICK, P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8711 SW 27th STREET

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

4. FEI Number

65-1037468

Applied For

Not Applicable

Zip

33328

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MARY HEDRICK

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

8711 SW 27th STREET

City

FT. LAUDERDALE

FL

Zip Code

33328

**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

Mary Hedrick - MARY HEDRICK

(NOTE: Registered Agent signature required when reinstating)

4/17/2002

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 \$61.25

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 | DIRECTOR MARY HEDRICK 8711 SW 27th St. DAVIG, FL 33328 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mary Hedrick - MARY HEDRICK

4/17/2002 (954) 600-4531

Date

Daytime Phone #

CR2E034B (12/01)