

2001 UNIFORM BUSINESS REPORT (UBR)

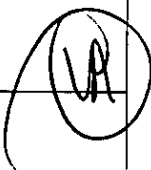
FILED
Sep 14, 2001 8:00 am
Secretary of State

09-14-2001 90006 040 ***150.00

U120333 AI

DOCUMENT # P00000101189

1. Entity Name
RONALD R. PERKINS, INC.



Principal Place of Business
**2950 CURRY LANE
 NOKOMIS FL 34275**

Mailing Address
**2950 CURRY LANE
 NOKOMIS FL 34275**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0998373

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PERKINS, TERESA M
 2950 CURRY LANE
 NOKOMIS FL 34275**

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.

SIGNATURE *[Handwritten Signature]*

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 Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PERKINS, RONALD R 2950 CURRY LANE NOKOMIS FL 34275 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERKINS, TERESA M 2950 CURRY LANE NOKOMIS FL 34275 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(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: *[Handwritten Signature]* PERKINS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 11 - 01 (941) 492-1110

Date

Daytime Phone #

CR2E034 (5/01)

Attachment
RONALD R. PERKINS, INC

P00000101189

C00716811

September 11, 2001

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

Document # P00000101189
FEI Number #65-0998373

Dear Corporations Officer,

Please accept my payment of \$150.00. I applied for Corporation status last year, my year runs from January to December but only received confirmation in September/October of last year. I thought the yearly fee was \$550.00 so I was waiting to send in the amount billed but I was recently told that it was a penalty for not responding in a timely manor to a previous notice. I do not believe that I received the notice mailed in January. If you accept this oversight and payment of \$150.00 I will pay in the future on-line the first of every year.

Sincerely,



Ronald R. Perkins
President