

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 11, 2002 8:00 am
Secretary of State

03-11-2002 90061 032 ***150.00

DOCUMENT # P00000117841

1. Entity Name
CARRI S. LEININGER, P.A.

Principal Place of Business
250 AUSTRALIAN AVE SOUTH #1102
WEST PALM BEACH FL 33401

Mailing Address
250 AUSTRALIAN AVE SOUTH #1102
WEST PALM BEACH FL 33401



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1555 Palm Beach Lakes Blvd
 Suite, Apt. #, etc.
Suite 301, WACHOVIA Tower
 City & State
West Palm Beach FL
 Zip
33401 Country
Palm Beach

3. Mailing Address
1555 Palm Beach Lakes Blvd.
 Suite, Apt. #, etc.
Suite 301, WACHOVIA Tower
 City & State
West Palm Beach, FL
 Zip
33401 Country
Palm Beach

4. FEI Number **65-1062180** Applied For
 Not Applicable

5. Certificate of Status Desired: ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEININGER, CARRI S
250 AUSTRALIAN AVE SOUTH #1102
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
WACHOVIA TOWER
1555 Palm Beach LAKES Blvd # 301
 City
West Palm Beach FL Zip Code
33401

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 _____ (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 \$150.00
After May 1, 2002 Fee will be \$550.00
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEININGER, CARRI S 250 AUSTRALIAN AVE. S. #1102 WEST PALM BEACH FL 33401	☐ 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 1555 PALM BEACH LAKES Blvd # 301 West Palm Beach FL 33401
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: _____

NOT REQUIRED **CARRI S. LEININGER**

Date

Daytime Phone #

561-615-5666

CR2E034 (9/01)