## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Feb 20, 2002 8:00 am Secretary of State DOCUMENT # P01000009206 **Entity Name** 02-20-2002 90153 010 \*\*\*158.75 MITH, MILES & COMPANY, P.A. rincipal Place of Business Mailing Address O EAST 5TH STREET 110 EAST 5TH STREET ANAMA CITY FL 32401 PANAMA CITY FL 32401 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3717263 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SMITH, HERMAN M JR Street Address (P.O. Box Number is Not Acceptable) 110 EAST 5TH STREET PANAMA CITY FL 32401 City Zip Code 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. GNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Addition ☐ Change HERMAN M. SMITH JR ME NAME MERMAN ... 110 EAST STN STREET 12401 REET ADDRESS STREET ADDRESS Y-ST-7IP CITY-ST-ZIP İΕ ☐ Delete TITLE Change ☐ Addition ME NAME ROBERT B. MILEI REET ADDRESS 110 EAST STH STREET STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP İLΕ ☐ Delete TITLE ☐ Change ☐ Addition ME NAME REET ADDRESS STREET ADDRESS IY-ST-ZIP CITY-ST-ZIP ĹΕ ☐ Delete TITLE Change ☐ Addition NAME REET ADDRESS STREET ADDRESS Y-ST-7IP CITY-ST-ZIP ☐ Delete TITI F Change ☐ Addition NAME REET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition ME NAME REET ADDRESS STREET ADDRESS CITY-ST-ZIP

**FILED** 

EDETAUTHE RMAN M. SMITH JR FEB 4 2002
Date

Date

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 received 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.

**IGNATURE:**