

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90330 004 ***150.00

DOCUMENT # P01000011258

1. Entity Name
INTELECHOICE, INC.

Principal Place of Business

**856 FOREST GLEN LANE
 WELLINGTON FL 33414**

Mailing Address

**856 FOREST GLEN LANE
 WELLINGTON FL 33414**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1080683

Applied For

Not Applicable

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

**MCDONALD, JEFF
 856 FOREST GLEN LANE
 WELLINGTON FL 33414**

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. I am familiar with, and accept the obligations of registered agent.

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 13, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCDONALD, JEFF 856 FOREST GLEN LANE WELLINGTON FL 33414	<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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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:

SIGNATURE REQUIRED

7/5/02

321-784-4846

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

001 00001/258
Intelechoice

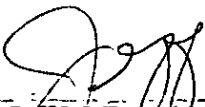
July 5, 2002

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

To whom it may concern,

Intelechoice Inc is a new corporation established in February of 2001. I just completed my first year of operation. Much of this is very new to me. With regards to the Uniform Business Reports Filings report, I received the original notification in the mail. I had just completed all my paperwork and had my accountant complete my return. Upon receipt of this document, I simply put it in to my file for my accountant without reading the document. When I received the latest document informing me that I was late filing and the fee had gone up to \$550 I immediately contacted your department and explained my story. The representative in your department suggested that I send in my report and original filing fee with a written explanation of why it was late. I hope that you will allow me this first year error. I fully understand the requirements now and will not be late in any upcoming year.

Thank you for your consideration.



Jeff McDonald
President, Intelechoice, Inc.
561-784-4846