

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

DOCUMENT # **PO1000012173**

1. Entity Name

Theodora Wantz P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1380 25TH ST SW

Suite, Apt. #, etc.

3. Mailing Address

1380 25TH ST SW

Suite, Apt. #, etc.

City & State

Naples FL

Zip

34117

Country

Collier

City & State

Naples FL

Zip

34117

Country

Collier

4. FEI Number

59-3696487

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name **Theodora Wantz PA**

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

1380 25TH ST SW

City **Naples**

FL

Zip Code

34117

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

Theodora Wantz PA

6/27/02

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered agent signature required when re-registering)

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
**Theodora Wantz PA
1380 25TH ST SW
Naples FL 34117**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
President

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 118.07(3)(b), 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:

Theodora Wantz

SIGNATURE AND TYPED OR PRINTED NAME OF SECOND OFFICER OR DIRECTOR

Theodora Wantz

Owner

991-353-2427

4/26/02

991-353-2427

4/26/02

Office Phone #

**FILED
Jul 04, 2002 8:00 am
Secretary of State**

05-13-2002 90147 050 ***150.00

37824

DO NOT WRITE IN THIS SPACE