

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91338 033 ***150.00

FOR PROFIT CORPORATION

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PO1000017593

1. Entity Name

W. J. Higgins Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2308 Everest Parkway

Suite, Apt. #, etc.

3. Mailing Address

2308 Everest Parkway

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Cape Coral, FL

City & State
Cape Coral, FL

4. FEI Number
65-1083214

Applied For
Not Applicable

Zip
33904

Country
U.S.

Zip
33904

Country
U.S.

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Higgins, William J.

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

2308 Everest Parkway

City Cape Coral

FL

Zip Code
33904

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

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) ☐

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	P Higgins, William 2308 Everest Parkway Cape Coral, FL 33904	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**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 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 on an attachment with an address, with all other title employees.

SIGNATURE:

William J. Higgins

President

4-29-2002

(239) 281-3628

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

ICR2E034B (12/01)