

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90228 035 ***150.00

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DOCUMENT # P01000018881

1. Entity Name
SCOTT CONSULTING, INC.



Principal Place of Business
**750 J.W. HALINGTON ROAD
FREEPORT FL 32439
US**

Mailing Address
**750 J.W. HALINGTON ROAD
FREEPORT FL 32439
US**



2. Principal Place of Business
750 J.W. HOLLINGTON RD
Suite, Apt. #, etc.

3. Mailing Address
750 J.W. HOLLINGTON RD
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Freeport, FL
Zip
32439
Country
USA

City & State
Freeport, FL
Zip
32439
Country
USA

4. FEI Number **59-3721800**
Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**SCOTT, DONALD M
8967 E. CO. HWY., 30-A
PANAMA CITY BEACH FL 32413**

7. Name and Address of New Registered Agent

Name
SCOTT, DONALD M
Street Address (P.O. Box Number is Not Acceptable)
750 J.W. HOLLINGTON ROAD
City
Freeport FL Zip Code
32439

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
SCOTT, DONALD M
8967 E. CO. HWY., 30-A
PANAMA CITY BEACH FL 32413** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
SCOTT, DONALD M
750 J.W. HOLLINGTON RD
Freeport, FL 32439** ☐ Change ☐ Addition
Address correction only

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
SCOTT, JULIE A
8967 E. CO. HWY., 30-A
PANAMA CITY BEACH FL 32413** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
SCOTT, JULIE A
750 J.W. HOLLINGTON RD
Freeport, FL 32439** ☐ Change ☐ Addition
Address correction only

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-03 850-835-4624
Date Daytime Phone #

CR2E034 (10/02)