

FILED
Sep 10, 2002 8:00 am
Secretary of State

09-10-2002 90210 010 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P 01000024880

1. Entity Name

ALL-COURT, INC.

DO NOT WRITE IN THIS SPACE

978841

2. Principal Place of Business
5165 NE 9th ST.

3. Mailing Address
5165 NE 9th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
OCALA, FLORIDA

City & State
OCALA, FLORIDA

4. FEI Number
54-2069278

Applied For
Not Applicable

Zip
34470

Country
USA

Zip
34470

Country
USA

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

7. Name and Address of Current Registered Agent

Name

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

3442 SE LAKE WEIR RI

City

OCALA

FL

Zip Code

34171

**DO NOT WRITE
IN THIS SPACE**

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

08/26/02

Signature of person or persons of registered agent, and date if applicable.

(NOTE: Registered Agent Signature required when re-stating)

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-STATE-ZIP
p/s/t/d William S. Littell, III
5165 NE 9th St.
Ocala, Florida 34470

TITLE
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CITY-STATE-ZIP

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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)(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:

PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM S LITTELL, III

Date

Daytime Phone #

08/26/02 352-732-7104

CR2E034B (12/01)

Attachment
RICHARD A. SPAHN & ASSOCIATES, P.A.
ACCOUNTING AND TAX CONSULTANTS

9/18/04

PROFESSIONAL BUILDING
1601 N. PALM AVENUE
SUITE 208
PEMBROKE PINES, FLORIDA 33026
PHONE: (954) 430-7675
FAX: (954) 430-7674

PROFESSIONAL BUILDING
3442 S.E. LAKE WEIR ROAD
SUITE B
OCALA, FLORIDA 34471
PHONE: (352) 732-2104
FAX: (352) 671-5373

AUGUST 30, 2002

FLORIDA DEPARTMENT OF STATE:

DEAR MADAM/SIR:

RE: ALL COURT, INC.
P 1000024880

THE TAXPAYER REQUESTED THAT I WRITE YOU CONCERNING THE ANNUAL REPORT FOR THE YEAR OF 2002.

IT APPEARS THAT BECAUSE OF A MOVE AND AN ADDRESS CHANGE THE TAXPAYER WAS NEVER IN RECEIPT OF THE ANNUAL REPORT ORIGINALLY MAILED BY YOUR OFFICE I JANUARY OF 2002.

SINCE THE TAXPAYER WAS ALSO THE RESIDENT AGENT HE WAS NOT AWARE OF THE PROCEDURE TO BE FOLLOWED ANNUALLY TO INSURE THAT THE CORPORATION BE MAINTAINED ON AN ACTIVE CURRENT STATUS.

YOU WILL NOTE THAT THIS CORPORATION WAS A NEWLY FORMED CORPORATION AND WAS NOT IN EXISTENCE FOR A NUMBER OF YEARS AND THEREFORE SHOULD HAVE KNOWN THE ANNUAL FILING PRODEDURE.

IN VIEW OF THE ABOVE CIRCUMSTANCES, THE TAXPAYER IS REQUESTING THAT YOUR OFFICE ACCEPT THE ENCLOSED CHECK FOR \$150. AND CONSIDER THE CORPORATION AS AN ACTIVE CURRENT CORPORATION FOR THE YEAR OF 2002.

SINCERELY,

