

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2002 8:00 am
Secretary of State

08-04-2002 90157 014 ***150.00

DOCUMENT # P01000034629

1. Entity Name
TALE DANCER CHARTERS, INC.

Principal Place of Business
26871 MCLAUGHLIN BOULEVARD
BONITA SPRINGS FL 34134

Mailing Address
26871 MCLAUGHLIN BOULEVARD
BONITA SPRINGS FL 34134

2. Principal Place of Business

26871 MCLAUGHLIN BLVD

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bonita Springs

City & State

Same

Zip

34134

Country

Lee

Zip

Same

Country

Same

4. FEI Number

65-1092287

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name **Same**

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 **James A. Hinds Pres**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7-19-02

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 \$550.00 150
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

TITLE **PTD** ☐ Delete
NAME **HINDS, JAMES A**
STREET ADDRESS **26871 MCLAUGHLIN BOULEVARD**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE **SVD** ☐ Delete
NAME **HINDS, LYNN C**
STREET ADDRESS **26871 MCLAUGHLIN BOULEVARD**
CITY-ST-ZIP **BONITA SPRINGS FL 34134**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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: **James A. Hinds**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-19-02

Date

Daytime Phone #

239-498-1974

CR2E034 (4/02)

Attachment
PO10000034629

July 19, 2002

To Whom it may concern:

We called your office in regards to the 2002 uniform business report. We had noticed the filing fee was \$550.- instead of \$150.⁵⁰. We had never received A previous report to have been filed earlier. The person at your office that I spoke to says this does happen occasionally, and that we should write a letter requesting the late fee be waived and to send \$150.- along with report.

Our corporation is in its first year of operation, I don't know if that is why we did not receive our report, but we will make sure to put on the calendar when this is due, and call if we do not receive our report. Thanks for your understanding.

Thank you

Jim Hinder, Tale Dancer Characters^{INC.}

