

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 FEB 14 PM 1:38

DOCUMENT # **P01000055961**

1. Entity Name

**Outdoor Accessories of Florida Inc**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**17407 Jean Street**

Suite, Apt. #, etc.

3. Mailing Address

**6072 Cocos Drive**

Suite, Apt. #, etc.

City & State

**Fort Myers FL**

City & State

**Fort Myers FL**

Zip

**33912**

Country

**USA**

Zip

**330808**

Country

**USA**

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name

**Mark Apter**

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

**6072 Cocos Drive**

City

**Fort Myers**

FL

Zip Code

**33908**

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

**Mark Apter**

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

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

**1-16-03**

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
**Pres  
Mark Apter  
6072 Cocos Drive  
Fort Myers FL 33908**

TITLE  
NAME  
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CITY-STATE-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

**Mark Apter**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-16-03**

DATE

**239 466-0313**

DAYTIME PHONE #

CR2E034B (12/02)

# OUTDOOR ACCESSORIES

2922

February 10, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee Florida 32314  
Attn: Kathy Ashton

Dear Kathy

I apologize for this mistake on our part. We started the corporation but did not start doing any work in production for many months and moved to a new location. The current tenant in our old building did not forward us all of our mail, and I forgot about this yearly fee and when I realized I went to your web page and printed the forms and sent in what I thought was the fee.

We are a new small company and hope you will work with us on this error, and I assure you this will not happen again.

Thank you in advance for your help



Mark Apter