

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90100 049 ***150.00

DOCUMENT # P01000058591

1. Entity Name
HENDERSON & FLOYD, P.A.

Principal Place of Business
**320 N MAGNOLIA AVE STE B-8
ORLANDO FL 32801**

Mailing Address
**320 N MAGNOLIA AVE STE B-8
ORLANDO FL 32801**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

320 N. Magnolia Ave

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite A-10

City & State

City & State

Orlando, FL

4. FEI Number

59-3726454

Applied For

Not Applicable

Zip

Country

Zip

Country

32801

U.S.A.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDERSON, RHONDA
1100 SOUTH DELANEY AVE APT F505
ORLANDO FL 32806**

Name

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

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)

**FILE NOW!!! FEE IS \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **FLOYD, RAQUEL**
CITY-ST-ZIP **6153 RALEIGH ST APT 1328
ORLANDO FL 32835**

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **HENDERSON, RHONDA**
CITY-ST-ZIP **1100 SOUTH DELANEY AVE APT F505
ORLANDO FL 32806**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

8/26/02

CR2E034 (4/02)

attachment

HENDERSON & FLOYD, P.A.
ATTORNEYS AT LAW

PO1000058591

320 N. MAGNOLIA AVE., SUITE A-10, ORLANDO, FL 32801
PH. 407-999-5005 FAX 407-648-0094
E-MAIL: HENDERSON.FLOYD@LAW.COM

August 26, 2002

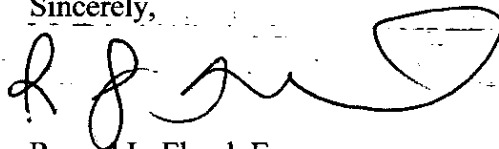
- Division of Corporations
- Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Uniform Business Report

To Whom it May Concern:

Our company did not receive prior notice of the filing of the Uniform Business Report. Please accept the attached form and our payment of \$150.00. If you have any questions, please feel free to contact us at the phone number above.

Sincerely,



Raquel L. Floyd, Esq.