## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Mar 06, 2002 8:00 am secretary of State P01000065073 DOCUMENT # 1. Entity Name FLORIDA SERVICE ASSOCIATES, INC. 03-06-2002 90027 004 \*\*\*150.00 Principal Place of Business Mailing Address 3774 OLD LIGHTHOUSE CIRCLE 3774 OLD LIGHTHOUSE CIRCLE WELLINGTON FL 33414 **WELLINGTON FL 33414** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ---7. Name and Address of New Registered Agent AMOROSO, KELLY M Street Address (P.O. Box Number is Not Acceptable) 3774 OLD LIGHTHOUSE CIRCLE **WELLINGTON FL 33414** City 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE TITLE ☐ Delete Change ☐ Addition NAME AMOROSO, KELLY M NAME 3774 OLD LIGHTHOUSE CIRCLE STREET ADDRESS STREET ADDRESS **WELLINGTON FL 33414** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete -TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachme with an address

**FILED** 

WATTERSON, HYLAND & KLETT
PROFESSIONAL ASSOCIATION

41947

February 20, 2002

## Via Certified Mail (#7000 0520 0016 6765 4672) Return Receipt Requested

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

Re: Florida Service Associates, Inc.

Dear Sir or Madam:

Enclosed please find the original 2002 Uniform Business Report for Florida Service Associates, Inc., signed by the Director, Kellly Amoroso. Also enclosed is Ms. Amoroso's check for \$150.00 payable to the Department of State for the filing fee of the 2002 Uniform Business Report.

Please make note in the Division of Corporations' file for Florida Service Associates, Inc. that the corporation has filed its Annual Report for 2002.

Thank you for your cooperation in this matter.

Sincerely,

Laura L. Massey

Corporate Services Paralegal

Enclosures

Cc:\_\_\_Ms. Kelly Amoroso

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100 P.C.A. Boulevard & Palm Book Cordon El 32610 . Dhan 561 627 5000 . Participation 601 627 5000