

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90215 001 ***300.00

DOCUMENT # P01000067990

1. Entity Name
ACKLAND & ASSOCIATES, INC.

Principal Place of Business
2658 EMERALD LAKE COURT
KISSIMMEE FL 34744

Mailing Address
2658 EMERALD LAKE COURT
KISSIMMEE FL 34744



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8 BROADWAY AVE

3. Mailing Address
SAME

Suite, Apt. #, etc.
SUITE A

Suite, Apt. #, etc.

City & State
KISSIMMEE FLORIDA

City & State

4. FEI Number
59-3723043

Applied For
☐ Not Applicable

Zip
34741

Country
OSCEOLA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ACKLAND, L B
2658 EMERALD LAKE COURT
KISSIMMEE FL 34744

7. Name and Address of New Registered Agent

Name
ACKLAND, LAWRENCE B
 Street Address (P.O. Box Number is Not Acceptable)
8 BROADWAY AVE. SUITE A
 City
KISSIMMEE FL Zip Code
34741

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

LAWRENCE B. ACKLAND,

4/28/02

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN LAWRENCE B. ACKLAND 8 BROADWAY AVE. SUITE A KISSIMMEE, FL 34741	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO STEPHEN J. LAYCOCK 8 BROADWAY AVE KISSIMMEE, FL 34741	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CHAIRMAN OF THE BOARD LAWRENCE B. ACKLAND 8 BROADWAY AVE SUITE A KISSIMMEE, FL 34741	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO STEPHEN J. LAYCOCK 8 BROADWAY AVE. SUITE A KISSIMMEE, FL 34741	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: **LAWRENCE B. ACKLAND, CHAIRMAN** 4/28/02 407 935 9888
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)