

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90124 041 ***150.00

DOCUMENT # P01000068623

1. Entity Name
THOMAS STALLINGS, INC.

Principal Place of Business
9612 NEAL DRIVE
JACKSONVILLE FL 32257

Mailing Address
9612 NEAL DRIVE
JACKSONVILLE FL 32257

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3730995

Applied For

Not Applicable

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

STALLINGS, THOMAS
9612 NEAL DRIVE
JACKSONVILLE FL 32257

Name

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

6683 CRILL AVE

City

PAIATKA

FL

Zip Code

32177

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 NAME STREET ADDRESS CITY-ST-ZIP	Thomas Stallings 6683 CRILL AVE PAIATKA, FL 32177	<input type="checkbox"/> Delete P
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CR2E034 (4/02)

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 another like empowered.

SIGNATURE:

Thomas Stallings
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/12/02

(386)
328-4164

Attachment
#PO1000068623
121859

July 15, 2002

To Whom It May Concern:

I am sending in my UBR form along with the fee of \$150.00. I changed to a different accounting firm this year. The prior accounting firm had trouble in getting the report to me, because I had moved several times this year due to marital problems. I would greatly appreciate any help you could give me. I cannot afford to pay the additional \$400.00.

Sincerely,
Tom Stallings