

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90151 048 ***550.00

DOCUMENT # P010000727941. Entity Name
CCAS CONSULTING, INC.Principal Place of Business
**314 RINGLING POINTE DRIVE
SARASOTA FL 34234**Mailing Address
**314 RINGLING POINTE DRIVE
SARASOTA FL 34234**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1123315

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**MARTELL, JAMES
314 RINGLING POINTE DRIVE
SARASOTA FL 34234**

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 **D** ☐ Delete
NAME **MARTELL, JAMES**
STREET ADDRESS **314 RINGLING POINTE DRIVE**
CITY-ST-ZIP **SARASOTA FL 34234**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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:

RE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/15/02
Date941-351-0751
Daytime Phone #

CR2E034 (4/02)

Attachment

PO1000072794
124006

James Martell
CCAS Consulting
314 Ringling Pointe Drive
Sarasota, FL 34234

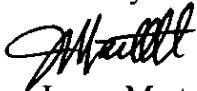
Aug. 15, 2002

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

Dear Sir:

I had recently registered my new company 65-1123315. I just received documentation from you to pay a fee of \$550 fee (which includes late fees) and I had no idea that this was late! All I have received is this notice and am paying it, to avoid further late fees. I would like to request a refund of the original amount minus the late fees, because I had not received the first notice. Perhaps, this is due to the fact that this is a new account. I am sure you will agree with me and refund the proper amount.

Thank you.



James Martell
CCAS Consulting