

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90005 013 ***163.75

DOCUMENT # P01000072826

1. Entity Name
ADJUSTER ASSOCIATES, INC.

Principal Place of Business

**869 BAYOU VIEW DR.
 BRANDON FL 33510**

Mailing Address

**869 BAYOU VIEW DR.
 BRANDON FL 33510**

2. Principal Place of Business

3. Mailing Address

PO BOX 482

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MANGO, FL

Zip

Country

33550 HILLS

4. FEI Number

59-3734145

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**YACH, ROY H SR.
 869 BAYOU VIEW DR.
 BRANDON FL 33510**

7. Name and Address of New Registered Agent

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.

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 \$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 **D** ☐ Delete
 NAME **YACH, ROY H JR.**
 STREET ADDRESS **2903 WILDER CREEK CIRCLE**
 CITY-ST-ZIP **PLANT CITY FL 33566**

TITLE **D** ☐ Delete
 NAME **MUENCH, ANDREA**
 STREET ADDRESS **9910 BIG BEND RD.**
 CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE **D** ☐ Delete
 NAME **BUBOLZ, RHONDA**
 STREET ADDRESS **2510 WILSON CT., #7**
 CITY-ST-ZIP **APPLETON WI 54915**

TITLE **D** ☐ Delete
 NAME **YACH, ROY H SR.**
 STREET ADDRESS **869 BAYOU VIEW DR.**
 CITY-ST-ZIP **BRANDON FL 33510**

TITLE **D** ☐ Delete
 NAME **YACH, LINDA A**
 STREET ADDRESS **869 BAYOU VIEW DR.**
 CITY-ST-ZIP **BRANDON FL 33510**

TITLE **D** ☐ Delete
 NAME **MARTIN, WENDY**
 STREET ADDRESS **300 SHINDLER PLACE #307**
 CITY-ST-ZIP **MENASHA WI 54952**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☒ Addition
 NAME **DR. JOE BINARD**
 STREET ADDRESS **902 SHAGOS DRIVE**
 CITY-ST-ZIP **APOLLO BEACH, FL 33572**

TITLE **D** ☐ Change ☒ Addition
 NAME **RONALD CAVALIER SR**
 STREET ADDRESS **2801 ST. ANTHONY DRIVE**
 CITY-ST-ZIP **VALRBO, FL 33594**

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

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

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

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: **Roy H. Yach Sr** **813-218-0264 3-5893**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)