2002 UNIFORM BUSINESS REPORT (UBR)

Sep 29, 2002 8:00 am Secretary of State P01000079898 DOCUMENT # 1. Entity Name 09-29-2002 90001 011 ***150.00 TAILS C.F. INC. Principal Place of Business Mailing Address 15210 AMBERLY DR APT 1625 15210 AMBERLY DR APT 1625 TAMPA FL 33647 TAMPA FL 33647 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For <u>62-1864250</u> Not Applicable 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 Name FOULK, COURTNEY Street Address (P.O. Box Number is Not Acceptable) 15210 AMBERLY DR APT 1625 TAMPA FL 33647 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. 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change Addition FOULK, COURTNEY NAME NAME 15210 AMBERLY DR APT 1625 STREET ADDRESS STREET ADDRESS TAMPA FL 33647 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY_ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition 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

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 receiper or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

9-23-02

813-495-6239

☐ Change

☐ Addition

FILED

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Rim III. Ridenhour, CHA, II. A. POI 00 00 79898

CERTIFIED PUBLIC ACCOUNTANT DOVER SQUARE, SUITE F 1616 BATTLEGROUND AVENUE GREENSBORO, NORTH CAROLINA 27408

P.O. BOX 38456 GREENSBORO, NORTH CAROLINA 27438 (336) 275-0842 • FAX (336) 275-0843

Kim W. Ridenhour

Member American Institute of CPAs N.C. Association of CPAs

September 23, 2002

Division of Corporations----

P.O. Box 1500

Tallahassee, FL 32302-1500

Re:

2002 Uniform Business Report, Tails C.F., Inc.

EIN: 62-1864250

I am writing on behalf of my client, Tails C.F., Inc., regarding the company's 2002 Uniform Business Report.

I am requesting that you abate the penalties and late fees assessed to my client for reasonable cause. Tails C.F., Inc. is a new company and 2002 is the first year for which my client is required to file the UBR. My client was unaware of the requirement to file this form, and did not receive a letter from your office prior to the due date of May 1, 2002. As soon as my client received your most recent letter, she took action to be in compliance. Attached, please find the completed 2002 Uniform Business Report for Tails C.F., Inc. as well as the filing fee of \$150.00.

Again, I am requesting that you abate the penalties assessed to Tails C.F., Inc. I appreciate your consideration of this matter. Should you have any further questions, you may contact me at 336-275-0842.

Sincerely.

Kim WRiderhaur

Kim W. Ridenhour Certified Public Accountant

I attest that the above statement is true and correct.

president Tails C.F. inc