

FILED
Jun 05, 2002 8:00 am
Secretary of State

05-13-2002 90150 025 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000079963 ✓

1. Entity Name

NEAL HELSEL AND ASSOCIATES, INC.

DO NOT WRITE IN THIS SPACE

91588

2. Principal Place of Business

1301 SEMINOLE BOULEVARD

3. Mailing Address

POB 1476

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 12B

DO NOT WRITE IN THIS SPACE

City & State

LARGO, FLORIDA

City & State

LARGO, FLORIDA

4. FEI Number

65-1134192

Applied For

Not Applicable

Zip

33770

Country

USA

Zip

33779

Country

USA

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

FINANCIAL FOUNDATIONS, INC

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

3150 SANDY RIDGE DRIVE

City

CLEARWATER

FL

Zip Code

33761

DO NOT WRITE
IN THIS SPACE

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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

PRESIDENT
NEAL HELSEL
1301 SEMINOLE BLVD., S-12B
LARGO, FL 33770

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Neal Helsel NEAL HELSEL

April 23, 2002 727-585-0980

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED048 (12/01)