

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90088 017 ***150.00

DOCUMENT # P01000084992

1. Entity Name

SEAN STRINGER, D.C., P.A.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2477 STICKNEY POINT ROAD

Suite, Apt. #, etc.

SUITE 121B

City & State

SARASOTA, FL 34231

Zip

34231

Country

USA

3. Mailing Address

612 COUNTRY CLUB WAY

Suite, Apt. #, etc.

City & State

VENICE, FL

Zip

34292

Country

USA

4. FEI Number

65-1133311

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

SEAN STRINGER

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

612 COUNTRY CLUB WAY

City

VENICE

FL

Zip Code

34292

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)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

P/N/T/S/D/C/M
SEAN STRINGER
612 COUNTRY CLUB WAY
VENICE, FL 34292

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/10/2002 941-923-9787

Day

Daytime Phone #

CR2E034B (12/01)



SEAN STRINGER, DC, CSCS
Chiropractic Physician • Certified Strength & Conditioning Specialist

Attachment
980584
PO 1000084992

September 11, 2002

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

Dear Sir or Madam:

Yesterday a friend made me aware that I had to file a Uniform Business Report with the State of Florida and I did not know what she was talking about. She as well as myself formed new corporations in 2001. She had just received a piece of mail earlier this week stating that she was late in filing a UBR. I, on the other hand, did not receive any correspondence concerning this issue. I called the Division of Corporations office yesterday to find out what I needed to do and they told me to send a check for \$150 with the enclosed forms to you, so that is why I am writing you today. I have enclosed the UBR with my \$150 check and I ask that you check your records and verify my mailing address for future correspondence. Please call me if there are any questions concerning this issue at 941-923-9787. Thank you for your time and assistance.

Sincerely,

Sean Stringer, DC