

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90056 008 ***150.00

DOCUMENT # P01000091931

1. Entity Name
RAY PETTIT, INC.



Principal Place of Business
**6117 OAK ROYAL DRIVE
LAKE WORTH FL 33463**

Mailing Address
**6117 OAK ROYAL DRIVE
LAKE WORTH FL 33463**

2. Principal Place of Business

148 S.W. RIDGECREST DR.

3. Mailing Address

148 S.W. RIDGECREST DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State
PORT ST LUCIE FL

City & State
PORT ST. LUCIE FL

4. FEI Number **65-1132421**

Applied For
Not Applicable

Zip **34953** Country **ST. LUCIE**

Zip **34953** Country **ST. LUCIE**

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

6. Name and Address of Current Registered Agent

**PETTIT, RAY
6117 OAK ROYAL DRIVE
LAKE WORTH FL 33463**

7. Name and Address of New Registered Agent

Name **PETTIT, RAY**
Street Address (P.O. Box Number is Not Acceptable)
NEW ADDRESS → 148 S.W. RIDGECREST DR
City **PORT ST LUCIE FL** Zip Code **34953**

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **PETTIT, RAY**
STREET ADDRESS **6117 OAK ROYAL DRIVE**
CITY-ST-ZIP **LAKE WORTH FL 33463**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE OF RAY PETTIT** 1/7/03 561-436-1053
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)