

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

08-13-2003 90078 012 ***150.00

DOCUMENT # P01000095567

1. Entity Name
J. ASHER TINGLE, INC.



Principal Place of Business
**1125 SW 45TH TERR
CAPE CORAL FL 33914**

Mailing Address
**1125 SW 45TH TERR
CAPE CORAL FL 33914**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1144692**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TINGLE, J. ASHER
1125 SW 45TH TERR
CAPE CORAL FL 33914**

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. 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 \$550.00
After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PS** ☐ Delete
NAME **TINGLE, J. ASHER**
STREET ADDRESS **1125 SW 45TH TERR**
CITY-ST-ZIP **CAPE CORAL FL 33914**

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

TITLE **V** ☐ Delete
NAME **IZZO, DOM**
STREET ADDRESS **1125 SW 45TH TERR**
CITY-ST-ZIP **CAPE CORAL FL 33914**

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

TITLE **T** ☐ Delete
NAME **TINGLE, JAN**
STREET ADDRESS **1125 SW 45TH TERR**
CITY-ST-ZIP **CAPE CORAL FL 33914**

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

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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: **NATURAL REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAN TWIGG

7/30/03

Date

239-565-2026

Daytime Phone #

CR2E034 (4/03)

Attachment

80138326
P01000095567

Kevin M. Burns & Associates, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

4507 S.E. 16th Place

Cape Coral, FL 33904

Telephone (239) 542-1976 • Fax (239) 542-1815

August 11, 2003

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

Re: J. Asher Tingle, Inc.
EIN 65-1144692
Uniform Business Report

Dear Sir or Madam:

I am writing this letter in conjunction with the filing of the attached 2003 For Profit Corporation Uniform Business Report. While Mr. Tingle agrees that the report is being filed late, he is asking that you consider the circumstances related to the late filing and consider abating the late filing fee.

Mr. Tingle started his business in September of 2001. As a new business owner, he is heavily dependent on your informative mailings to let him know when various forms are required to be filed. Unfortunately, he did not receive his first business report for 2003 and did not become aware of missing the filing date until he received the second business report. While he recognizes that it is his responsibility to file the report, he is requesting that you abate the late filing fee for this year.

I have enclosed the signed report and a check for \$150. If I can provide any additional assistance in resolving this matter, please do not hesitate to call.

Sincerely,



Anthony M. Constantino

ENCLOSURE

IF YOU ARE THE ADDRESSEE OF THIS MAILING, YOU MAY REMOVE THE ENCLOSURE FROM THE MAILING AND RETURN IT TO THE DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FL 32302-1500. IF YOU ARE NOT THE ADDRESSEE, YOU SHOULD RETURN THE MAILING TO THE DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FL 32302-1500.