

602 UNIFORM BUSINESS REPORT (UBR)

06-11-2002 90150'001 ***150.00

P01000114077

DOCUMENT # P01000114077

1. Entity Name

RICHARD M. VERRETTE, DDS, MAGD, PA

FILED

02 SEP -4 PM 2:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

446 UNIVERSITY BLVD. N.
JACKSONVILLE FL 32277

Mailing Address

446 UNIVERSITY BLVD. N.
JACKSONVILLE FL 32277

2. Principal Place of Business

456 University Blvd, N

Suite, Apt. #, etc.

3. Mailing Address

456 University Blvd N.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-3761247

Applied For

Not Applicable

Zip

32211

Country

USA

Zip

32211

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VERRETTE, RICHARD M
456 UNIVERSITY BLVD. N
JACKSONVILLE FL 32277

7. Name and Address of New Registered Agent

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.

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)



FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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	D VERRETTE, RICHARD M 456 UNIVERSITY BLVD. N. JACKSONVILLE FL 32277	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/6/02 (984) 721-1400
Date Daytime Phone #

CR2F024 (0/0/1)

09/05/2002 00:54 FAX

001

ent By: Carter, Merolle & Co., P.A.;

9043984878;

Sep-4-02 1:45PM;

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* MICHELLE MILLIGAN *

val



**Carter
Merolle &
Company, P.A.**
CERTIFIED PUBLIC ACCOUNTANTS

August 6, 2002

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Richard M. Verrette, DDS, MAGD, P.A.
Filing of the Uniform Business Report
Reference #: P01000114077

Dear Sirs:

My client, Richard Verrette, requested that I provide you with an explanation for the late filing of the Uniform Business Report for 2002.

The receipt of the Uniform Business Report was after the filing deadline of May 1, 2002. The form was received on June 6th. Due to this being the first year of the corporation, my client was not aware of the filing requirement or deadline.

It is my understanding that the client has filed the report and submitted the \$150.00 filing fee-see attached letter. Now that my client is aware of the filing requirement, the report will be filed by the deadline in the future.

Please accept the report as timely filed and abate the late fee of \$400.00.

Your cooperation in this matter will be greatly appreciated.

Sincerely,

Augustus L. Merolle, CPA

Augustus L. Merolle, CPA

Richard M. Verrette
RICHARD M. VERRETTE

Jacksonville Office
2570 Atlantic Boulevard, Suite 1
Jacksonville, Florida 32207
904/398-3031
FAX 904/398-4878

Beaches Office
2708 Ocean Drive
Third Floor
Jacksonville Beach, Florida 32250
904/241-1913

Reply To:
☒ Jacksonville Office
☐ Beaches Office