

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000114325

FILED
Aug 22, 2002
Secretary of State

Entity Name: ROBERT K. MEEKS, P.A.

Current Principal Place of Business:

528 ORANGE DRIVE, #17
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

2909 CEDENA COVE ST
ORLANDO, FL 32817

Current Mailing Address:

528 ORANGE DRIVE, #17
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

2909 CEDENA COVE ST
ORLANDO, FL 32817

FEI Number: 52-2335951

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEEKS, ROBERT K
528 ORANGE DRIVE, #17
ALTAMONTE SPRINGS, FL 32701

Name and Address of New Registered Agent:

MEEKS, ROBERT K
2909 CEDENA COVE ST
ORLANDO, FL 32817

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:

08/22/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: MEEKS, ROBERT K
Address: 2909 CEDENA COVE ST
City-St-Zip: ORLANDO, FL 32817

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT K MEEKS

PRES

08/22/2002

Electronic Signature of Signing Officer or Director

Date