

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2003 8:00 am
Secretary of State

07-14-2003 90342 044 ***150.00

DOCUMENT # P02000059836

1. Entity Name
JOHN L. FALVEY, P.A.



Principal Place of Business
**5631 A COACH HOUSE CIR.
BOCA RATON FL 33488**

Mailing Address
**5631 A COACH HOUSE CIR.
BOCA RATON FL 33488**

55052303



2. Principal Place of Business

3. Mailing Address

☐ CHECK HERE IF MAKING CHANGES

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

30-0085001

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

**WOOD, THEODORE P
5631 A COACH HOUSE CIR.
BOCA RATON FL 33488**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D FALVEY, JOHN L
5631 A COACH HOUSE CIR.
BOCA RATON FL 33488** ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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 REQUIRED JOHN FALVEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

7-10-03

561-706-3171

Attachment

55052303

#P02000059836

JOHNNY FALVEY

5631-A- Coach House Circle

Boca Raton, Florida 33486

Phone 561-392-9112

johnnyf26@aol.com

July 22, 2003

Florida Department of State

Secretary of State

Glenda E. Hood

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

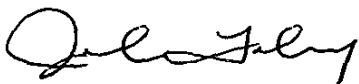
To whom it may concern,

As per your "Frequently Asked Questions" number (1).
Located on the back of your form concerning "UBR" Reports.
It states that an officer of the corporation must put in writing
a notice to your Department stating that The Corporation did
NOT receive a prior notice. Therefore the penalty can be
waived.

As per those instruction please accept this as a formal notice
that this Corporation did **NOT** receive prior notice. Also as
per those instruction I John Falvey as President of the
Corporation respectfully ask that the penalty be waived,
furthermore as stated in the instructions, please find
enclosed our check #1103 in the amount of One Hundred
Fifty Dollars (\$150.00).

If more information is required or I may assist further, please
contact me at the numbers listed above.

Yours truly,



John Falvey -President