

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

2005 Rev 1/2

DOCUMENT # P03000094741

1. Entity Name Loretta M Shelton PA



FILED
05 NOV 14 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5924 Springview Dr
Suite, Apt. #, etc. A

3. Mailing Address 1515 Ridge wood Ave
Suite, Apt. #, etc. A

City, State Port Orange FL City, State Holly Hill FL

Zip 32127 Country USA Zip 32117 Country USA

DO NOT WRITE IN THIS SPACE

4. FET Number 20-0181362 Applied For ☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Joe Loguidice

Street Address 1515 Ridge wood Ave. SpA

City Holly Hill State FL Zip 32117

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] (NOTE: Registered Agent signature required when registering)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
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 <u>P</u>	NAME <u>Shelton Loretta</u>
STREET ADDRESS <u>5924 Springview Dr</u>	
CITY - ST - ZIP <u>Port Orange FL 32127</u>	
TITLE	NAME
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CITY - ST - ZIP	
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200061414422
11/14/05-01047-011 \$150.00

**DO NOT WRITE
IN THIS SPACE**

[Signature]

2. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Loretta M Shelton

10/30/05 (38) 760-4359

Florida Department of State
Attn: (UBR 2005)
P O Box 6327
Tallahassee, FL 32314-6327

2/2

October 30, 2005

Dear Sir or Madam:

As per our conversation 10/30/05 with your office, this letter is to inform your office that

We never received report for the 2005 uniform business report. We sent in a letter changing our

mailing address when the office moved. Our office spoke with a

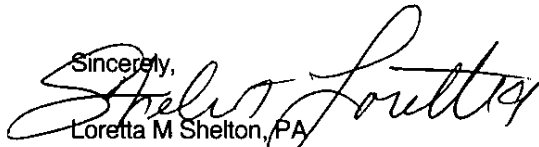
supervisor this person advised me to let your office know of the correct address.

Your office also said all penalty fees would be waved due to the problems our company had with the mailing address.

Furthermore, we got a letter saying the late fee was not waved; the Division of Corporations advised me to send this letter and all late fees would be waved as on the Internet filing just mark the box saying the original form was never received and we never did get form and we and until September 1, 2005.

Please make the Correct changes to my records and file my corporation UBR from for 2005.

Thank you for your time in concerning this matter.

Sincerely,

Loretta M Shelton, PA
5924 Springview Dr
Port Orange FL 32127