

P10000039071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

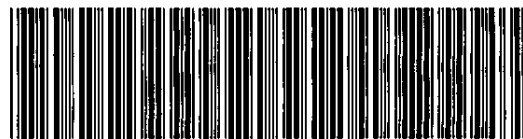
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Entity Name

No Events

No Name History

Detail by Entity Name**Florida Profit Corporation**

G.R.WILEY, INC.

Filing Information

Document Number P10000039071

FEI/EIN Number NONE

Date Filed 05/05/2010

State FL

Status ACTIVE

Effective Date 05/05/2010

Principal Address12118 STILL MEADOW DR.
CLERMONT FL 34711**Mailing Address**12118 STILL MEADOW DR.
CLERMONT FL 34711**Registered Agent Name & Address**WILEY, GEOFF R
12118 STILL MEADOW DR.
CLERMONT FL 34711 US**Officer/Director Detail****Name & Address**

Title P

WILEY, GEOFF R
12118 STILL MEADOW DR.
CLERMONT FL 34711**Annual Reports**

No Annual Reports Filed

Document Images

27-2514107
THIS CORP. DID
NOT SUBMIT
A FID # IN SoS.

THAT IS NEEDED TO
REGISTER IN OUR
SYSTEM

NEXT

IRS Verification Form

Form must be accompanied by a completed 8821

IRS EE Name: Schmidt

IRS EE Badge ID #: 0144891


Client's EIN: 27-2514107

Client's Legal Name: GR Willey Inc.

Client's Legal Address: 12118 Still Meadow Dr.

Clermont, FL 34711-6649 180

Sales Rep: Jessica Piera

Signature: 

Verification Date: 8/30/10

Verification Time: 5:50 PM

Form **8821**

(Rev. August 2008)

Department of the Treasury
Internal Revenue Service**Tax Information Authorization*** Do not sign this form unless all applicable lines have been completed.
* Do not use this form to request a copy or transcript of your tax return.

Instead, use Form 4506 or Form 4506-T

OMB No. 1545-1185

FOR IRS Use Only

Received By:

Name _____

Telephone (_____) _____

Function _____

Date ____/____/____

1 Taxpayer Information. Taxpayer(s) must sign and date this form on line 7.

Taxpayer name(s) and address (type or print)

GR Wiley Inc

12118 Still Meadow Dr

Clermont, FL 34711

Social security number(s)

263 | 79 | 6655

Employer Identification Number

27-2514107

Daytime telephone number

(407)963-7502

Plan number (if applicable)

2 Appointee. If you wish to name more than one appointee, attach a list to this form.

Name and address

Paychex, Inc. 161124166**911 Panorama Trail South****Rochester, NY 14625**

CAF No.

Telephone No.

Fax No.

Check if new: Address ☐ Telephone No. ☐ Fax No. ☐**3 Tax matters.** The appointee is authorized to inspect and/or receive confidential tax information in any office of the IRS for the tax matters listed on this line. Do not use Form 8821 to request copies of tax returns.

(a) Type of Tax (Income, Employment Excise, etc.) or Civil Penalty	(b) Tax Form Number (1040, 941, 720, etc.)	(c) Year(s) or Period(s) (see the instructions for line 3)	(d) Specific Tax Matters (see instr.)

4 Specific use not recorded on Centralized Authorization File (CAF). If the tax information authorization is for a specific use not recorded on CAF, check this box. See the instructions on page 4. If you check this box, skip lines 5 and 6.For name, address & EIN verification and/or research of entity ☒**5 Disclosure of tax information** (you must check a box on line 5a or 5b unless the box on line 4 is checked):a If you want copies of tax information, notices, and other written communications sent to the appointee on an ongoing basis, check this box ☐b If you do not want any copies of notices or communications sent to your appointee, check this box ☐**6 Retention/revocation of tax information authorizations.** This tax information authorization automatically revokes all prior authorizations for the same tax matters you listed on line 3 above unless you checked the box on line 4. If you do not want to revoke a prior tax information authorization, you must attach a copy of any authorizations you want to remain in effect and check this box ☐

To revoke this tax information authorization, see the instructions on page 4.

7 Signature of taxpayer(s). If a tax matter applies to a joint return, either husband or wife must sign. If signed by a corporate officer, partner, guardian, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute this form with respect to the tax matters/periods on line 3 above.

* IF NOT SIGNED AND DATED, THIS TAX INFORMATION AUTHORIZATION WILL BE RETURNED.

* DO NOT SIGN THIS FORM IF IT IS BLANK OR INCOMPLETE.

8/26/2010

Signature

Date

Signature

Date

Geoff Wiley**President**

Print Name

Title (if applicable)

Print Name

Title (if applicable)

☐ ☐ ☐ ☐ PIN number for electronic signature☐ ☐ ☐ ☐ PIN number for electronic signature

Malave, Erin

From: Seidel, Marijke V [mseidel@paychex.com]
Sent: Tuesday, December 14, 2010 7:04 PM
To: CorpAddressChange
Subject: EIN update for Sunbiz.org
Attachments: Scan001.PDF



Scan001.PDF
(158 KB)

Good afternoon,

A current client of ours asked me to forward this IRS information to you.

Apparently the EIN# has never been updated on Sunbiz, so could you please use the supporting information to enter in their: FEI/EIN Number?

They just submitted their DR-1 online application today, and they did not want the missing FEI/EIN Number, to hold up getting a SUI Acct#.

If you have any questions, please feel free to call me or the client.

Client Contact: Geoff Wiley Tel# 407-963-7502

Thank you for your time.

Marijke Seidel
Paychex Inc
Sales Assistant
Tel # 800-532-4980 ext. 22750
Fax # 877-884-0645

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