

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2000 8:00 am
Secretary of State

08-15-2000 90007 006 ***150.00

DOCUMENT # P12216			
1. Entity Name			
(R)			
Principal Place of Business		Mailing Address	
850 STEPHENSON HWY. STE 310 TROY, MI 48083		1133 E MAPLE STE 204 TROY, MI 48083	
2. Principal Place of Business		3. Mailing Address	
850 STEPHENSON HWY.		850 STEPHENSON HWY	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
STE 324		STE 324	
City & State		City & State	
TROY MI		TROY MI	
Zip	Country	Zip	Country
48083	USA	48083	USA
4. FEI Number		Applied For	
38-2021008		Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			
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) <input checked="" type="checkbox"/>		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	
10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees.	
11. OFFICERS AND DIRECTORS			
TITLE	PST	<input type="checkbox"/> Delete	
NAME	ZEIDLER, EBERHARD H		
STREET ADDRESS	850 STEPHENSON HWY STE 310		
CITY - ST - ZIP	TROY MI 48083		
TITLE	D	<input type="checkbox"/> Delete	
NAME	ZEIDLER, EBERHARD H		
STREET ADDRESS	850 STEPHENSON HWY STE 310		
CITY - ST - ZIP	TROY MI 48083		
TITLE	S	<input type="checkbox"/> Delete	
NAME	GRINNELL, IAN		
STREET ADDRESS	850 STEPHENSON HWY STE 310		
CITY - ST - ZIP	TROY MI 48083		
TITLE	T	<input type="checkbox"/> Delete	
NAME	WAKAYAMA, PETER		
STREET ADDRESS	850 STEPHENSON HWY STE 310		
CITY - ST - ZIP	TROY MI 48083		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	PST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZEIDLER, EBERHARD H		
STREET ADDRESS	850 STEPHENSON HWY STE 324		
CITY - ST - ZIP	TROY MI 48083		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ZEIDLER, EBERHARD H		
STREET ADDRESS	850 STEPHENSON HWY STE 324		
CITY - ST - ZIP	TROY MI 48083		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GRINNELL, IAN		
STREET ADDRESS	850 STEPHENSON HWY STE 324		
CITY - ST - ZIP	TROY MI 48083		
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WAKAYAMA, PETER		
STREET ADDRESS	850 STEPHENSON HWY STE 324		
CITY - ST - ZIP	TROY MI 48083		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			
STREET ADDRESS			
CITY - ST - ZIP			
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: EBERHARD H. ZEIDLER <i>E. Zeidler</i> Aug. 2, 2000 (416) 596-8300 ext. 205			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

CR2E034 (9/99)

DENNIS T. DOLBEE & CO., P.L.L.C.

Certified Public Accountants

Attachment

DOC#:
P12216

A0072577

081400

850 Stephenson Hwy • Suite 324 • Troy, Michigan 48083
(248) 588-1913 • Fax (248) 588-1914

August 9, 2000

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

**Re: 2000 Uniform Business Report, CR2E034
Zeidler Roberts Partnership, Inc.**


Dear Sir or Madam:

Enclosed is the 2000 Uniform Business Report for Zeidler Roberts Partnership, Inc.

Also enclosed is a check for the filing fee in the amount of \$150.00.

Because of the corporation's change of address, notices 1 and 2 were never received causing the filing of this report to be late. We hope you will take this into consideration and waive the late filing fee.

Very truly yours,



Dennis T. Dolbee

DTD/bd

Enclosures: as stated