

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

FILED
May 02, 2002 8:00 am
Secretary of State

05-02-2002 90131 028 ***150.00

DOCUMENT # **P93000002978** ✓
1. Entity Name
VERLY INCORPORATED

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
752 CONNEMARA CT.
Suite, Apt. #, etc.
3. Mailing Address **IN CARE OF LAURIE BOLAM**
611 ALBEE FARM RD
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
VENICE, FL
Zip
34285
Country
City & State
NOKOMIS, FL
Zip
34275
Country
4. FEI Number
65-037992-0
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
LAURIE A. BOLAM

Street Address (P.O. Box Number is Not Acceptable)

611 ALBEE FARM RD.

City
NOKOMIS Zip Code
FL 34275

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PRESIDENT	FRANCOIS A. A. VERLY	752 CONNEMARA CT.	VENICE, FL. 34292
SEC. / TREASURER	CAROL ELIZABETH VERLY	752 CONNEMARA CT.	VENICE, FL. 34292

**DO NOT WRITE
IN THIS SPACE**

CR2E034B (12/01)

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/22/02 (941) 716-1585

ATTACH # P93000002978/645673

Service Solutions, L.L.C.
611 Albee Farm Road
Nokomis, Florida 34275
(941) 716-1585,

April 22nd, 2002

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

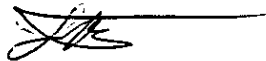
Re: Annual Report of
Verly Corporation

Dear Sir:

Enclosed please find the original Annual Report in regards to the Verly Corporation.

A check in the amount of \$150.00 is enclosed for the filing fees. Thank you for your attention regarding this matter

Sincerely,



Laurie A. Bolam

Enclosures
LAB/kay.