

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90196 037 ***150.00

DOCUMENT # P93000041205

1. Entity Name

ALTON P. GEIGER, INC.

Principal Place of Business

**530 E. NOBLE AVE.
WILLISTON FL 32696**

Mailing Address

**530 E. NOBLE AVE.
WILLISTON FL 32696**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3188640

Applied For

Not Applicable

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

**GEIGER, ALTON P
530 E. NOBLE AVE.
WILLISTON FL 32696**

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) ☐

**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GEIGER, ALTON P
330 N.W. 1ST ST.
WILLISTON FL 32696** ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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

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: *Alton P. Geiger*

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

Date

Daytime Phone #

2-28-01

352-528-2981

CR2E034 (5/01)

Attachment
Doc. # C6074504
P93000041205

SHARON C. BRANNAN, CPA PA

161 N. MAIN STREET
WILLISTON, FL 32696

Telephone (352) 528-6558
Fax (352) 528-5559

July 28, 2001

State of Florida
Division of Corporations
P Box 1500
Tallahassee, FL 32302-1500

Dear Sir:

This letter is in reference to Alton P. Geiger, Inc. (59-3188640) regarding late filing of the 2001 Uniform Business Report.

Taxpayer states they did not receive the first notice of the annual report renewal form. Usually taxpayer brings all forms received to this office for filing, but they don't recall ever receiving the original form.

As soon as taxpayer received the second notice, they immediately brought me their check and report for filing. Taxpayer has not been late in the past, and there was no intentional disregard for payment or filing on behalf of the taxpayer.

We respectfully request an abatement of the assessed penalty of \$400.00. Please accept this report and the enclosed payment for \$150.00. Taxpayer will make every effort for timely filing in the future. Thank you in advance for your consideration in this matter. We look forward to your response.

Sincerely,



Sharon C. Brannan, CPA PA

cc: Alton P. Geiger, Inc.