## 2002 UNIFORM BUSINESS REPORT (UBR)

## May 28, 2002 8:00 am Secretary of State DOCUMENT # P93000078193 1. Entity Name 05-28-2002 91619 047 \*\*\*150.00 DENNIS REEVES COOPER COMPANY Principal Place of Business Mailing Address 422 FLEMING ST **PO BOX 567** KEYWEST FL 33040 KEY WEST FL 33041 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0448845 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired\_ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name COOPER, DENNIS R Street Address (P.O. Box Number is Not Acceptable) **422 FLEMING ST** KEYWEST FL 33040 City 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 FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State <u>.11.</u> OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME **COOPER, DENNIS REEVES** NAME STREET ADDRESS **422 FLEMING ST** STREET ADDRESS KEY WEST FL 33040 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

poplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information all poort 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 using a movement to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if I hereby certify that the indicated on this report ormation or suppleme of the corporation or the changed, or on an atta

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 



Attachment Document# P93000078193 435704

THIS GOT BURIED IN A
STACK OF PARENUOKE,

PLEASE WAIVE LATE

THEE, THIS WOULD BE
A REAL HARDSHIP FOR

MY SMALL BUSINESS.

THANK YOU,

DEWNIS REEVES COMPRIS

