

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90081 043 ***150.00

0538876 AV

DOCUMENT # P94000014546

1. Entity Name

FRANK I. GREY, P.A.

Principal Place of Business

**5709 TIDALWAVE DRIVE
NEW PORT RICHEY FL 34652
US**

Mailing Address

**5709 TIDALWAVE DRIVE
NEW PORT RICHEY FL 34652
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3223387

Applied For

Not Applicable

Zip

Country

Zip

Country

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

GREY, FRANK I**5709 TIDALWAVE DRIVE
NEW PORT RICHEY FL 34652**

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPST
GREY, FRANK I
5709 TIDALWAVE DRIVE
NEW PORT RICHEY FL**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ 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:

FRANK I. GREY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-2002

Date

(727) 847-5854

Daytime Phone #

CR2E034 (9/01)

ATTACH DOC# P94000014546

HOBBY, GREY & REEVES

Attorneys and Counsellors at Law

H. CLYDE HOBBY, PA
FRANK I. GREY, PA
FREDERICK T. REEVES
CLARKE G. HOBBY

345108
5709 TIDALWAVE DRIVE
NEW PORT RICHEY, FLORIDA 34652
TELEPHONE: (727) 847-5854
FACSIMILE: (727) 841-8685

March 12, 2002

State OF Florida
Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: FRANK I. GREY, P.A.
ANNUAL CORPORATE REPORT
DOCUMENT NO: P-94000014546

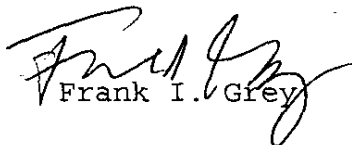
Dear Sirs:

Enclosed please find the original Corporate Annual Report for 2002, for Frank I. Grey, P.A., together with check in the amount of \$150.00 for the filing fee.

Thanking you, I remain

Very truly yours,

FIG/pc
Enc.


Frank I. Grey