

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 08, 2001 8:00 am**  
**Secretary of State**

0057102

**DOCUMENT # P94000027580**

03-08-2001 90096 036 \*\*\*150.00

1. Entity Name  
**THE STUDIO OF JOHN B. HACKLER IV, INC. .**

Principal Place of Business <b>807 S. ORLANDO AVE.          SUITE F          WINTER PARK FL 32789          US</b>	Mailing Address <b>807 S. ORLANDO AVE.          SUITE F          WINTER PARK FL 32789          US</b>
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3241361**

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

**HACKLER, JOHN B IV  
 801 S ORLANDO AVENUE  
 SUITE F  
 WINTER PARK FL 32789**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD HACKLER, JOHN B IV 807 S. ORLANDO AVE. #F WINTER PARK FL 32789</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary Karen Nicholson Hackler 807 S. Orlando Ave #F Winter Park FL 32789</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: **22 FEB 2001 407.6476600**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)

John B Hackler IV, President  
Member, American Institute of Architects

# P94 000027580  
726765

21February2001

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

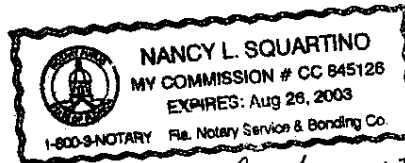
Re: The Studio of John B. Hackler IV, Inc

Dear Sirs:

The Board of Directors has met and has added Karen Nicholson Hackler to the Corporation. Her title is Secretary for The Studio of John B. Hackler.

Respectfully submitted,

  
John B Hackler IV



*Nancy L. Squartino*

*Signed on the 21<sup>st</sup> day of February,  
2001. John B. Hackler IV is personally  
known to me.*

## Studioinc

Winter Park Business Center  
807 S. Orlando Ave. Suite F  
Winter Park, FL 32789

Tel 407.647.6600  
Fax 407.647.5220