

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000047979

1. Entity Name

R.D. MOSS & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

12055 63RD ROAD
LIVE OAK FL 32060
US

12055 63RD ROAD
LIVE OAK FL 32060
US

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 59-3259879

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

MOSS, RONALD D
12055 63RD RD
LIVE OAK FL 32060

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 reinstalling)

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, 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 D ☐ Delete
NAME MOSS, RONALD D
STREET ADDRESS 12055 63RD ROAD
CITY-ST-ZIP LIVE OAK FL

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

TITLE D ☐ Delete
NAME MOSS, JUNE W
STREET ADDRESS 12050 63RD ROAD
CITY-ST-ZIP LIVE OAK FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APPROVED
06-27-2001 90290 044 ***150.00
P94000047979

01 JUL 10 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

SP

5/2/01 904-963-2018

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R.D. Moss & Associates, Inc. MANUFACTURERS REPRESENTATIVE

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

Reference: P94000047969

At the suggestion of Tyrone (245-6059) I'm calling your attention to the fact that I did not receive the 2001 Uniform Business Report in time to report to earlier that I did.

I have given you the filing fee of \$150.00 and suggest that is all I should be required to pay based on the circumstances.

Looking forward to your immediate response.

Regards,

R.D. Moss & Associates, Inc.

Ronald D. Moss

✓ cc: The Honorable Katherine Harris
Office of the Secretary of State
The Capitol
Tallahassee, FL 32399-0250