FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9400008466Y

1. Entity Name

Robert Quigley, Inc.

FILED

03 JUN -9 AM 10: 13

SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business

2910 Commerce Pk Dr.

Suite, Apt. #, etc.

3. Mailing Address

2910 Commerce Pk Dr

Suite, Apt. #, etc.

City & State Boynton Beach Fl

Zip 33426   Country USA

City & State Boynton Beach, Fl

Zip 33426   Country USA

4. FEI Number 65-0541279

Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

7. Name and Address of Current Registered Agent

Name— Ilbonk, Irg

Street Address (P.O. Box Number is Not Acceptable)

1030 Lake Ave,
Suite C

City Lake Worth   FL   Zip Code 33460

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE DPT NAME Quigley, Robert STREET ADDRESS 2910 Commerce Pk. Dr. CITY-ST-ZIP Boynton Beach, Fl 33426	TITLE NAME STREET ADDRESS CITY-ST-ZIP 600020681246 06/09/03--01054--007 **150.00
TITLE DVS NAME Quigley, Faye STREET ADDRESS 2910 Commerce Park Dr. CITY-ST-ZIP Boynton Beach, Fl 33426	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP

CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert A Quigley   Robert A Quigley   6-5-03   561-582-3626

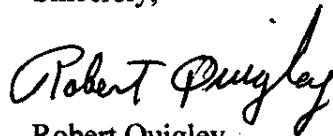SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

To Whom It May Concern:

Last week I talked to a gentleman and explained to him why I did not send this form in before May 1st. He said that he would send me a form and instructed me to fill it out and write an explanation and I would not have to pay the late fee.

My accountant called me last week to ask me if I sent in my corporation papers. I had not received the papers in the mail and had not thought of them at all. I immediately called to explain that I had not received them and needed the form sent to me as soon as possible. Enclosed is the form and payment. Please accept this payment and waive the late fee. I have always been on time and would certainly have followed directions if I had received the papers in the mail when they were originally sent. This is not the first time I have not received important mail at my place of business. Thank you for your consideration.

Sincerely,

Robert Quigley
Robert Quigley, Inc.