

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000024357

1. Entity Name

ULTRA ASSOCIATES, INC.

FILED
May 12, 2000 8:00 am
Secretary of State

05-12-2000 90882 010 ***558.75

Principal Place of Business

C/O CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

Mailing Address

C/O CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301-2608

2. Principal Place of Business

Bugg, Wolf, Wilkerson
Suite, Apt. #, etc.
Suite 170

3. Mailing Address

411 Andrews Road
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Durham, NC 27705

City & State

4. FEI Number

54-1752182

Applied For

Not Applicable

Zip

Country

Zip

Country

USA

5. Certificate of Status Desired

XX

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STAEHLE, RUTH S.
2480 TREASURE ISLE DRIVE
PALM BEACH GARDENS FL 33410

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)

XX

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 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
DPS
MASON, JOHN W
1111 INDUSTRY AVENUE SE
ROANOKE VA 24013

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
Bugg, John E.
Bugg, Wolf, and Wilkerson
411 Andrews Road

XX Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Suite 170
Durham, N.C. 27705
USA

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ Change ☐ 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:

SIGNATURE REQUIRED

5 May 2000

(919) 383-9431

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)