

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90191 040 ***150.00

DOCUMENT # P95000027026

1. Entity Name
JANICE ROBINSON-DAVIS, P.A.



Principal Place of Business
**30 COLORADO RD
LEHIGH ACRES FL 33936**

Mailing Address
**P O BOX 364
LEHIGH ACRES FL 33970**



2. Principal Place of Business
1251 Taylor Lane
Suite, Apt. #, etc.
6A

3. Mailing Address
same
Suite, Apt. #, etc.

City & State
Lehigh Acres FL

City & State

4. FEI Number **65-0657092**

Applied For
Not Applicable

Zip **33936** Country **USA**

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

**DAVIS-ROBINSON, JANICE
127 DANIA CIR.
LEHIGH ACRES FL 33936**

Name
Street Address (P.O. Box Number is Not Acceptable)
276 Ground Dove Circle
City **Lehigh Acres** **FL** Zip Code **33936**

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 **Janice Robinson Davis**
(Signature, typed or printed name of registered agent and title if applicable.)

(NOTE: Registered Agent signature required when reinstating)

4/5/03
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **ROBINSON-DAVIS, JANICE E**
STREET ADDRESS **112 GREENWOOD AVE**
CITY-ST-ZIP **LEHIGH ACRES FL 33936**

TITLE **P** ☐ Change ☐ Addition
NAME **ROBINSON-DAVIS, JANICE E**
STREET ADDRESS **276 Ground Dove Circle**
CITY-ST-ZIP **Lehigh Acres FL 33936**

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Janice Robinson Davis**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/03
Date

Daytime Phone #

CR2E034 (10/02)