

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91571 005 \*\*\*150.00

**DOCUMENT # P95000073464**

1. Entity Name

**RICHARD J. ROACH, JR., P.A.**

Principal Place of Business

**5034 WILLOW OAK LANE**

**SPRING HILL, FL 34607**

**US**

Mailing Address

**5034 WILLOW OAK LANE**

**SPRING HILL, FL 34607**

**US**

2. Principal Place of Business

**3396 HOLLY SPRINGS DRIVE**

3. Mailing Address

**3396 HOLLY SPRINGS DRIVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**SPRING HILL, FL 34607**

City & State

**SPRING HILL, FL 34607**

Zip

Country

Zip

Country

4. FEI Number

**59-3339603**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ROACH, RICHARD J JR**

**5034 WILLOW OAK LANE**

**SPRING HILL FL 34607**

7. Name and Address of New Registered Agent

Name  
**ROACH, JR., RICHARD J.**

Street Address (P.O. Box Number is Not Acceptable)  
**3396 HOLLY SPRINGS DRIVE**

City  
**SPRING HILL,**

**FL**

Zip Code  
**34607**

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: *Richard J. Roach Jr.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

*4/18/02*

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, 2002 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

TITLE  
**DPST**  
NAME  
**ROACH, RICHARD J JR.**  
STREET ADDRESS  
**5034 WILLOW OAK LANE**  
CITY-ST-ZIP  
**SPRING HILL FL 34607**

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
**D/P/S/T**  
NAME  
**ROACH, JR., RICHARD J.**  
STREET ADDRESS  
**3396 HOLLY SPRINGS DRIVE**  
CITY-ST-ZIP  
**SPRING HILL, FL 34607**

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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☐ 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: *Richard J. Roach Jr.* **RICHARD J. ROACH, JR.** *352-596-9762*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)