

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90625 005 ***150.00

DOCUMENT # P96000030640

1. Entity Name
HOME PREPARATION CORPORATION

Principal Place of Business

11206 HIGHLAND CIR.
BOCA RATON FL 33428

Mailing Address

11206 HIGHLAND CIR.
BOCA RATON FL 33428

2. Principal Place of Business

5137 Prairie Dunes Vill.
Suite, Apt. #, etc.

3. Mailing Address

5137 Prairie Dunes Village Cir
Suite, Apt. #, etc.

City & State

Lake Worth

City & State

33463 USA

4. FEI Number

65-0668347

Applied For

Not Applicable

Zip

33463

Country

USA

Zip

33463

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SCHOEN, VAN A
11206 HIGHLAND CIR.
BOCA RATON FL 33428

5137 Prairie Dunes Village Circle
Lake Worth Florida
33463

7. Name and Address of New Registered Agent

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)

☒

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 **PVTS** ☐ Delete
NAME **SCHOEN, VAN A**
STREET ADDRESS **8957 CYPRESS LANE, SOUTH**
CITY-ST-ZIP **BOCA RATON FL 33433**

TITLE **D** ☒ Delete
NAME **SCHOEN, VAN A**
STREET ADDRESS **11206 HIGHLAND CIR.**
CITY-ST-ZIP **BOCA RATON FL 33428**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Schoen VAN** ☒ Change ☐ Addition
NAME
STREET ADDRESS **5137 Prairie Dunes Village Circle**
CITY-ST-ZIP **Lake Worth Florida 33463**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-28-02

Date

661-439-1913

Daytime Phone #

CR2E034 (9/01)