

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90190 042 ***150.00

DOCUMENT # P96000035418

1. Entity Name
R. STEPHEN OTTEWELL, P.A.

Principal Place of Business

5301 N. FEDERAL HWY.
 STE. 200
 BOCA RATON FL 33487

Mailing Address

5301 N. FEDERAL HWY.
 STE. 200
 BOCA RATON FL 33487-4910

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

P.O. Box 564

City & State

Zip

Country

Boca Raton, FL

33429-0564

USA

4. FEI Number **65-0660577**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

00000010



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

OTTEWELL, R. STEPHEN
5301 N. FEDERAL HWY. STE 200
BOCA RATON FL 33487

correct zip code

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code **33487**

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 *R. Stephen Ottewell P.V.T.S.* *zip code* DATE *Apr. 24 2000*

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

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	PVTS OTTEWELL, R. STEPHEN 6100 GLADES RD., STE. 204 BOCA RATON FL 33487	<input checked="" type="checkbox"/> Delete <i>Need correct name, spelling + address</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVTS Ottewell, R. Stephen 5301 N. Federal Hwy. Suite 200 Boca Raton, FL 33487	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *R. Stephen Ottewell P.V.T.S.* DATE: *4/24/2000* DAYTIME PHONE #: *561-883-3099*

CR2E034 (9/99)