

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P96000048173

1. Entity Name
MEEKER & ASSOCIATES, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
2531 WHALE HARBOR LN
FT LAUDERDALE FL 33312
US

Mailing Address
2531 WHALE HARBOR LANE
FT LAUDERDALE FL 33312
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2531 Whale Harbor
Suite, Apt. #, etc.

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

City & State
FT Land FI

City & State

4. FEI Number 65-0678840
Applied For
Not Applicable

Zip 33312 Country Broward

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MEEKER, JEANNIE
2531 WHALE HARBOR LN
FT LAUDERDALE FL 33312

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 *Jeannie Meeker* 7-15-2000
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 \$550.00 After SEPTEMBER 13, 2000 Min. will be \$750.00 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	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEEKER, JEANNIE		NAME		
STREET ADDRESS	2531 WHALE HARBOR LN		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEEKER, PAUL A		NAME		
STREET ADDRESS	2531 WHALE HARBOR LN		STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33312		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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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: *Jeannie Meeker* 7-15-2000 954 587-9555
Signature and typed or printed name of signing officer or director Date Daytime Phone #

Doc # P96000048175
18798 2 of 2

To Florida Department of State,
Att. Ms. Leckel,

This is now the completed form for the 2000 uniform business report.
I have already sent my corporation check #1424 on 4-28-99 for \$150.00. I know this form is late,
however, I hope this will make it right. If there are any questions or if you need another check
please call me at (954) 587-9555 or (954) 986-8238 Thank you so much.

Jeannie Meeker.