7/24

2001 UNIFORM BUSINESS REPORT (UBR)

Aug 10, 2001 8:00 am Secretary of State P96000072940 **DOCUMENT #** 07-24-2001 90003 011 ***150.00 1. Entity Name JOE D. FITZPATRICK, INC. Principal Place of Business Mailing Address 5625 CENTRAL AVE. 5025 CENTRAL AVE. SI_PETERSBURG FL 33710-ST. PETERSBURG FL 33710 2. Principal Place of Business 3. Mailing Address P.O. Box 4100 Ludlow Ro 43 Sulte, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Albion City & State Parma 4. FEI Number Applied For 59-3396324 MI MI Not Applicable 49269 Country \$8.75 Additional 5. Certificate of Status Desired ÏÚS A ÙSA · Èee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CHECHELE, T. SAMANTHA Street Address (P.O. Box Number is Not Acceptable) 5625 CENTRAL AVE. -ST. PETERSBURG FL 33710 Zip Code FI 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, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5:00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (5/01) HILE Delete TITLE Change ☐.Addition JOE D. Fitzpatrick FITZPATRICK, JOE D NAME NAME P.O. BOX 43 STREET ADDRESS STREET ANDRESS 5625 CENTRAL AVE. CITY-ST-ZIP ST. PETERSBURG FL 33710 CITY-ST-ZIP Parma, Mi 49269 TITLE Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME -NAME ---STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-\$1-719 CITY-ST-ZIP Change Addition TITLE Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change : TITLE ☐ Delete TITLE ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling 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 07, Florida statutes and that my name appears in Block 11 or Block 12 in the corporation of the receiver or trustee empowered to execute this report as required by Chapter 07, Florida statutes and that my name appears in Block 11 or Block 12 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida statutes and that my name appears in Block 11 or Block 12 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida statutes and the property of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida statutes and the property of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida statutes and the property of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida Statutes and the property of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida Statutes of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida Statutes of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida Statutes of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 07, Florida Statutes 0 under oath; that I am an officer or director by name appears in Block 11 or Block 12 if 747-3/200

T.S. CHECHELE, D.A

Artorney at Law

DOC#19600072940

Phone (727) 381-6007. Facsimile (727) 381-7909.

July 3, 2001.

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Joe D. Fitzpatrick, Inc.

Dear Sir or Madam:

Enclosed is Form UBR for Joe D. Fitzpatrick, Inc. together with a check in the amount of 150.00 for the 2001 fee. The corporation moved and did not receive its original form for filing the UBR until after the original due date. The shareholder/officer was unaware that the form had not been received until receiving the second notice on July 3.

We respectfully request that you accept the \$150.00 as payment in full for the 2001 UBR fee, because the payment of the additional amount would constitute an extreme financial hardship to the corporation and its sole shareholder. The failure to timely file was inadvertent and was the result of late receipt of the form.

The corporation will not ask for this consideration again. Thank you.

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Very truly your

T. Samantha Chechele

cc./ Joe D. Fitzpatrick

Enclosures





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FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

July 25, 2001

JOE D. FITZPATRICK, INC. P O BOX 43 PARMA, MI 49269

Subject: JOE D. FITZPATRICK, INC.

Reference

P96000072940

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/fv ANNUAL REPORTS SECTION