

DOCUMENT # P96000074236

1. Entity Name

STEPHEN M. MOON, P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

01 AUG 14 AM 11:51



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
677 GEORGE J. KING BOULEVARD SUITE 111 PORT CANAVERAL FL 32920	677 GEORGE J. KING BOULEVARD SUITE 111 PORT CANAVERAL FL 32920

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	59-3397598	Applied For
		Not Applicable

5. Certificate of Status Desired	☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
MOON, STEPHEN M 677 GEORGE J. KING BOULEVARD SUITE 111 PORT CANAVERAL FL 32920

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, 2001 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 NAME STREET ADDRESS CITY-ST-ZIP	PVST MOON, STEPHEN M. 677 GEORGE J. KING BLVD. PORT CANAVERAL FL 32920 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 700004538757-1 -08/16/01--01073--010 ****150.00 ****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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 empowerments.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-10-01



STEPHEN M. MOON, P.A.

677 GEORGE J. KING BLVD.
SUITE 111
PORT CANAVERAL, FL 32920

STEPHEN M. MOON, ESQ.
Board Certified Admiralty and Maritime Lawyer

TELEPHONE (321) 868-0200
FAX (321) 868-0023

August 13, 2001

Mr. Sean Toner
Department Of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

SENT VIA OVERNIGHT MAIL

Re: 2001 Uniform Business Report-Stephen M. Moon, P.A.

Dear Mr. Toner:

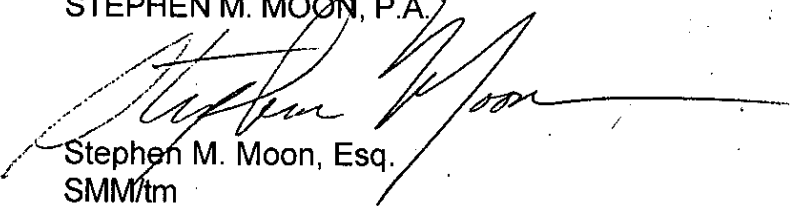
Enclosed please find copies of my 2001 Uniform Business Report and check, number 4789, made payable to the Department Of State that were mailed on April 10, 2001. I had no idea that these items were not received by the Division Of Corporations until my accountant pointed out that one of the documents I had forwarded at the end of the quarter was a notice from your department advising that my report and fee had not been received. I must admit that I did not understand the significance of the notice because I assumed that it was a mistake. After I heard from my accountant that the check had not been cleared I contacted my bank and was told that it had not been deposited by the State or anyone else. I have cancelled the check.

I have also enclosed a replacement check, number 4894, made payable to the Department Of State in the amount of One Hundred and Fifty Dollars (\$150.00). I request that the late fee be waived under the circumstances and would appreciate it if you would advise me of the State's position on my request. Your cooperation and assistance are greatly appreciated.

Thank you for your prompt attention to this matter.

Very truly yours,

STEPHEN M. MOON, P.A.


Stephen M. Moon, Esq.
SMM/tm