2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State P96000091655 DOCUMENT # 1. Entity Name 05-08-2002 90148 044 ***150.00 DEEN & LAURENCE, P.A. JEFFREY D. DEEN, P.A. Principal Place of Business Mailing Address 101 WYMORE ROAD, SUITE 337 101 WYMORE ROAD, SUITE 337 ALTAMONTE SPRINGS FL 32714 ALTAMONTE SPRINGS FL 32714 2. Principal Place of Business 3. Mailing Address 238 N Westmore Dr <u>238 N Westmore Dr</u> Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ste 105 Ste 105 City & State City & State 4. FEI Number Applied For 59-3410123 Altamonte Springs FL Altamonte Springs FL Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32714-3363 USA. 32714-3363 Fee Required USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Same DEEN, JEFF Street Address (P.O. Box Number is Not Acceptable) 101 WYMORE ROAD, SUITE 337 <u>238 N Westmore Dr Ste 105</u> ALTAMONTE SPRINGS FL 32714 Altamonte Springs Zip Code 32174-3363 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME DEEN, JEFFREY D NAME 101 WYMORE RD STE 337 STREET ADDRESS STREET ADDRESS ALTAMONTE SPRINGS FL CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME LAURENCE, STEVEN L NAME STREET ADDRESS 101 WYMORE RD STE 337 STREET ADDRESS CITY-ST-ZIP ALTAMONTE SPRINGS FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

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 of 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-7IP

Jeffrey D. Deen BE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Daytime Phone #

☐ Change

☐ Addition

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	JEF:	FREY D. DEE	EN, P.A.			65	5 117	" \mathcal{O}	
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238 N Westmore Dr Suite, Apt. #, etc.			238 N Westmo	238 N Westmore Dr					
Ste 105			Ste 105	Suite, Apt. #, etc. Ste 105			VRITE IN THIS S	SPACE	
Altamo	City & State Altamonte Springs FL			· · · · · · · · · · · · · · · · · · ·		4. FEI Number 59-3410	123	-	Applied For
Zip 32714-3	363	Country USA	Zip 32714-3363	Country USA		5. Certificate of Status Desire	d 🗆	\$8.75 A	dditional
	6. Name	and Address of Currer	nt Registered Agent			7: Name and Address of Ne		Fee Requir	red
ALTAM	YMORE ROAD ONTE SPRING	GS EL 32714		City	_238_N_W	O. Box Number is Not Accept lestmore Dr Ste e Springs	105 FL	Zip Coo 32174	ie 1–3363
				ts registered office	ce or registered	agent, or both, in the State of	Florida,		
9. This corp	opration is eligit		e FILE NOV	DTE: Registered Agent s VIII FEE IS: \$1:002 Fee will be	ignature required whe	agent, or both, in the State of	DATE		00 May Be
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SIGNATURE:

Jeffrey D Deen

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