

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

≥ 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # **P96000095177** EURETARY OF STATE 1. Entity Name PHSION OF CORPORATIONS RONALD H. WISNESKI, P.A. 00 JUL 14 PM 2: 18) Principal Place of Business Mailing Address 1001 NORTH U.S. HIGHWAY ONE, SUITE 600 1001 NORTH U.S. HIGHWAY ONE, SUITE 600 JUPITER FL 33477 JUPITER FL 33477-4479 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01-25-00 90090 028 City & State City & State 4. FEI Number Applied For 65-0711917 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WISNESKI, RONALD H Street Address (P.O. Box Number is Not Acceptable) 1001 NORTH U.S. HIGHWAY ONE, SUITE 600 JUPITER FL 33477 City 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) FILE NOW III FEE IS \$150.00 After MAY 11, 2000 Fee will be \$550.00 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. 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 12. TITLE ☐ Delete DICCCTOR TITLE Change WISNESKI, RONALD H NAME NAME WISNESKI, JONICA L 18586 LAKESIDE GARDENS DRIVE 18586 LAKESING GARDENS DAINE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JUPITER FL 33458 CITY-ST-ZIP JUPITEL FL 33458 TITLE ☐ Delete TITLE ☐ Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete ☐ Change Addition TITLE 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-ZIP TITLE ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change ☐ Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 ampowered 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 appreas with all other like empowered.

1-6-20W

Daytime Phone #

Haas Building, Suite 600 1001 N. U.S. Highway One Jupiter, FI 33477 561-747-2772 561-747-0094 Fax

Wisneski, Blakiston & Leslie



Fax:			Pages: Date:	1	
Phone:				07/05/00	
Re:	e: Ronald H Wisneski PA		CC:		
□ Urg	jent	☐ For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle

Comment

Ladies and gentlemen,

Please know that I received a (UBR) form which I originally had filed in January with the appropriate \$150 check. In a conversation with a representative form the Division I was told that a request was mailed to me in February requesting I Title my wife Jonica who was added on the Year 2000 form. I unfortunately never received that correspondence. I now was instructed to write the Division along with supplying a copy of the original return with the info as to title filled in. Please find that attached. Please also wave all penalties as I did file on a timely basis and with good intent. Thanks Ron