

FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90177 021 ***150.00

DOCUMENT # **P97000001103 ✓**

1. Entity Name:

Dixie L. Kist PA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

12 S. Orlando Ave

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Kissimmee FL

City & State

4. FEI Number

59-3422842

Applied For

Not Applicable

Zip

Country

34741-5674

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Dixie L Kist

Street Address (P.O. Box Number is Not Acceptable)

12 S. Orlando Ave

City

Kissimmee

FL

Zip Code

34741-5674

**DO NOT WRITE
IN THIS SPACE**

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.

No Change. Lost form.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

Dixie L Kist

(NOTE: Registered Agent signature required when reinstating)

2/4/02

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	P Dixie L Kist 12 S Orlando Ave Kissimmee FL 34741-5674	TITLE NAME STREET ADDRESS 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/4/02 407.944.9909

CR2E034B (12/01)

2001 UNIFORM BUSINESS ENTITY (U.B.E.)

DOCUMENT # P97000001103

1. Entity Name

DIXIE L. KIST, P.A.

Attachment
822381

12 S. ORLANDO AVE
KISSIMMEE FL 34741-5674

12 S. ORLANDO AVE
KISSIMMEE FL 34741-5674

2. Principal Officer

3. State

4. FE Number 59-3422842

5. Name and Address of Current Registered Agent

6. Name and Address of New Registered Agent

KIST, DIXIE L
12 S. ORLANDO AVE
KISSIMMEE FL 34741-5674

8. Registered Agent

9. State

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$650.00
Make Check Payable to Department of State

11.

P
KIST, DIXIE L
12 S ORLANDO AVE
KISSIMMEE FL 34741

12.

NAME
STREET ADDRESS
CITY - ST - ZIP

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
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 indicate 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name has changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Dixie L Kist* DIXIE L KIST

Date: 2/10/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

Attachment
822381

#P97000001103

January 30, 2002

DIXIE L. KIST, P.A.
12 S. ORLANDO AVE
KISSIMMEE, FL 34741-5674

SUBJECT: DIXIE L. KIST, P.A.
Ref. Number: P97000001103

We have received your document for DIXIE L. KIST, P.A. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Please complete the enclosed 2002 Uniform Business Report.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Barbara Mitchell
Document Specialist

Letter Number: 102A00005792

*Enclosed are the required
form and our check for \$150.00.
I apologize for inconvenience.*

Dixie L. Kist
2/4/02