

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90485 039 ***150.00

DOCUMENT # P97000020743

1. Entity Name
ATCHISON CONSULTANTS, INC.



Principal Place of Business
**7635 ALBERT TILLINGHAST DR
SARASOTA FL 34240
US**

Mailing Address
**CHONG TO ATCHISON CONSULTANTS INC
7635 ALBERT TILLINGHAST DRIVE
SARASOTA FL 34240
US**

2. Principal Place of Business

3. Mailing Address

ATCHISON CONSULTANTS, INC

Suite, Apt. #, etc.

7635 ALBERT Tillinghast Dr.

City & State

SARASOTA, FL

Zip

34240

Country

USA

City

SARASOTA

State

FL

Zip

34240

Country

USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0750013**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ATCHISON, JOSEPH E
ATCHISON CONSULTANTS INC
7635 ALBERT TILLINGHAST DR
SARASOTA FL 34240**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **JOSEPH E. ATCHISON**
Signature, typed or printed name of registered agent and title if applicable.

Joseph E. Atchison (Delete Chng To)
(NOTE: Registered Agent signature required when reinstating)

1/8/03
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Delete
NAME **ATCHISON, JOSEPH E**
STREET ADDRESS **7635 ALBERT TILLINGHAST DR.**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VS** ☐ Delete
NAME **ATCHISON, BETTY J**
STREET ADDRESS **7635 ALBERT TILLINGHAST DRIVE**
CITY-ST-ZIP **SARASOTA FL 34240**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Joseph E. Atchison President**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/03 941-322-3922
Date Daytime Phone #

CR2E034 (10/02)