

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90125 007 ***150.00

DOCUMENT # P97000058106

1. Entity Name

Business Response Center, Inc. ✓



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9262 NW 63rd CT

Suite, Apt. #, etc.

3. Mailing Address

9262 NW 63rd CT

Suite, Apt. #, etc.

10035394

DO NOT WRITE IN THIS SPACE

City & State

Parkland, FL

City & State

Parkland, FL

4. FEI Number

65-0165992

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Catherine G. Nelson

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

9262 NW 63rd CT

City Parkland

FL

Zip Code

33067

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

Catherine G. Nelson

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

(NOTE: Registered Agent signature required when re-registering)

2-23-2003

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME Catherine G. Nelson
STREET ADDRESS 9262 NW 63rd CT
CITY-ST-ZIP Parkland, FL 33067

TITLE
NAME Keith H. Nelson
STREET ADDRESS 9262 NW 63rd CT
CITY-ST-ZIP Parkland, FL 33067

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Catherine G. Nelson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-2003

DATE

Daytime Phone #

561-715-4530

CR2E034B (12/02)