

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2001 8:00 am
Secretary of State

02-02-2001 90280 024 ***158.75

DOCUMENT # P97000059208

1. Entity Name

ROY & ASSOCIATES, P.A.

Principal Place of Business

1818 S. AUSTRALIAN AVE.
 COMMERCE POINTE, STE. 400
 WEST PALM BEACH FL 33409
 US

Mailing Address

1818 S. AUSTRALIAN AVE.
 STE. 400
 WEST PALM BEACH FL 33409
 US

2. Principal Place of Business

440 Columbia Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach FL

Zip

33409

Country

3. Mailing Address

440 Columbia Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach FL

Zip

33409

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0765949

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

ROY, DAVE K
 1818 S. AUSTRALIAN AVE.
 COMMERCE POINTE, STE. 400
 WEST PALM BEACH FL 33409

7. Name and Address of New Registered Agent

Name

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

440 Columbia Drive Suite 300

City

West Palm Beach

FL

Zip Code

33409

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)

DATE

1/29/01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
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 DPVT ☐ Delete
 NAME ROY, DAVE K
 STREET ADDRESS 1818 S. AUSTRALIAN AVE, STE 400
 CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE S ☒ Delete
 NAME OLIVER, MEIKE
 STREET ADDRESS 1818 S. AUSTRALIAN AVE, SUITE 400
 CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPVST ☒ Change ☐ Addition
 NAME
 STREET ADDRESS 440 Columbia Drive Suite 300
 CITY-ST-ZIP West Palm Beach FL 33409

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

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

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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/01

Daytime Phone #

CR2E034 (10/00)