## **2002 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # 1. Entity Name TABLER APPRAISAL GROUP, INC.

P97000065344

Principal Place of Business Mailing Address 83 KNIGHT BOXX RD 6838 WOMANS CLUB DR. KEYSTONE HEIGHTS FL 32656 SUITE 103 ORANGE PARK FL 32065 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3459133 Not Applicable Zip Country 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 TABLER, JOHN R Street Address (P.O. Box Number is Not Acceptable) 6838 WOMANS CLUB DR KEYSTONE HEIGHTS FL 32656 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 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 TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME TABLER, JOHN R NAME 6838 WOMANS CLUB DR STREET ADDRESS STREET ADDRESS **KEYSTONE HEIGHTS FL 32656** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition TITLE Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition

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 enpower

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Sep 17, 2002 8:00 am Secretary of State

09-17-2002 90095 031 \*\*\*150.00

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HEOGHMENT # 197000065344 TABLER APPRAISAL GROUP, INC.

6838 Womans Club Drive Keystone Heights, Florida 32656 Phone: (904) 276-0010

Fax: (904) 272-3316

September 13, 2002

RE: Did Not Receive Original Uniform Business Report Filing Form

Dear Florida Department Of State, Division Of Corporations,

Please note the only request I received was the late notice stating fee of \$600 is due by September 13, 2002. My mailing address had changed on November 4, 2000 in which I had sent documentation to your department of the new address. I did receive the late notice at the 6838 Womans Club Drive, Keystone Heights, Florida 32656-9524 which is my current address on file with your office. On September 12, 2002 I spoke with the Division Of Corporations in which I was instructed to explain my situation and mail a check for \$150.

If further information is required please feel free to contact me at the phone number stated above.

Sincerely,

Jo<del>hn K. 1</del> abier

State Certified Residential Real Estate Appraiser 0002388