

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State
 04-02-2001 90084 045 ***150.00

0412335

DOCUMENT # P97000074479

1. Entity Name

LAW OFFICES OF TOMMY MEYER, PROFESSIONAL ASSOCIA

Principal Place of Business

**1444 1ST STREET
 SARASOTA FL 34236**

Mailing Address

**1444 1ST STREET
 SARASOTA FL 34236**

2. Principal Place of Business

1275 2ND STREET

Suite, Apt. #, etc.

3. Mailing Address

1275 2ND ST.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
SARASOTA FL

City & State
SARASOTA FL

4. FEI Number **65-0778500**

Applied For
 Not Applicable

Zip
34236

Country

Zip
34236

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MEYER, TOMMY
 1444 1ST STREET
 SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name

TOMMY MEYER

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

1275 2ND ST.

City

SARASOTA

FL

Zip Code

34236

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]

TOMMY MEYER Registered Agent 3-29-01

(NOTE: Registered Agent signature required when reinstating)

DATE

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 **PVP** ☐ Delete
 NAME **TOMMY MEYER**
 STREET ADDRESS **1444 1ST ST**
 CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **ST** ☐ Delete
 NAME **ELISABETH MEYER**
 STREET ADDRESS **1444 1ST ST**
 CITY-ST-ZIP **SARASOTA FL 34236**

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 **PVP** ☒ Change ☐ Addition
 NAME **TOMMY MEYER**
 STREET ADDRESS **1275 2ND ST.**
 CITY-ST-ZIP **SARASOTA FL 34236**

TITLE **ST** ☒ Change ☐ Addition
 NAME **ELISABETH MEYER**
 STREET ADDRESS **1275 2ND ST.**
 CITY-ST-ZIP **SARASOTA FL 34236**

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

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

TITLE ☐ Change ☐ Addition
 NAME
 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELISABETH H. MEYER

ST

3-29-01

Date

941-9554040

Daytime Phone *

CR2E034 (10/00)