

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

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90065 002 ***150.00

DOCUMENT # **P98000034554**

1. Entity Name

BEN MOODY APPRAISALS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

116 Motes Rd.

3. Mailing Address

116 Motes Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Palatka FL

City & State
Palatka FL

4. FPI Number

59-3506649

Applied For

Not Applicable

Zip
32177

Country
USA

Zip
32177

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name **Ben Moody**

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

**DO NOT WRITE
IN THIS SPACE**

116 Motes Rd.

City **Palatka**

FL

Zip Code **32177**

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

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	D MOODY, BEN 116 Motes Rd PALATKA, FL 32177
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IN THIS SPACE**

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

SIGNATURE: **P Ben Moody**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/2002

Date

386-437-6999

Daytime Phone #

CR2E034B (12/01)