

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 09, 2002 8:00 am
Secretary of State

07-09-2002 90023 039 ***150.00

DOCUMENT # P98000044796

1. Entity Name
BARON'S PATIO, INC.

Principal Place of Business

**10915 SE FEDERAL HWY
 HOBE SOUND FL 33455**

Mailing Address

**10915 SE FEDERAL HWY
 HOBE SOUND FL 33455**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0849961**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PATTON, CRAIG
 10915 SE FEDERAL HWY
 HOBE SOUND FL 33455**

Name

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

City

FL

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)

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **PATTON, CRAIG**
 STREET ADDRESS **10915 SE FEDERAL HWY**
 CITY-ST-ZIP **HOBE SOUND FL 33455**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 OF DIRECTOR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)

Baron's Patio

- Furniture Sales & Service
- Repairs - Restrapping
- Refinishing of Aluminum, Wrought Iron & Wicker

10915 S.E. Federal Hwy.
Hobe Sound, FL 33455
1 mi. North of Bridge Road -
barons1@bellsouth.net



Craig Patton
Owner

561-546-9175

Baron's Patio

Fax

Attachment

A PR0000479
11 9 11

To: FIA DEPT OF STATE From: Craig Patton
Fax: 561-546-9175
Phone: 561-546-9175
Date: 7/5/02
Re: _____

☐ Urgent ☐ For Review ☐ Please Acknowledge ☐ Please Reply

● Comments:

DEAR SIRS;

TO THE BEST OF MY KNOWLEDGE I DID NOT RECEIVE PRIOR NOTICE TO THIS OF THE 2002 UBR. ALTHOUGH WE DID MOVE AND CHANGED OUR ADDRESS, LAST YEARS WAS RECEIVED. FOR WHATEVER THE REASON I APOLOGISE SINCERELY FOR THE DELAY. WE HAVE ALWAYS PAID THIS FEE PROMPTLY IN THE PAST AND INTEND TO IN THE FUTURE. PLEASE WAIVE THE LATE FEE AND WE WILL MAKE AN EFFORT TO INQUIRE IF FUTURE REPORTS ARE NOT RECEIVED.

THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

SINCERELY CRAIG PATTON