

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**

**Mar 02, 2001 8:00 am**  
**Secretary of State**

03-02-2001 90021 011 \*\*\*150.00

**DOCUMENT # P98000045853**

1. Entity Name

**TALEWINS, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**114 CORAL FISH LANE E.  
JUPITER FL 33477**

**114 CORAL FISH LANE E.  
JUPITER FL 33477**

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

**65-0839872**

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

**Howard  
SYNNOTT, PRISCILLA Alden  
114 CORAL FISH LANE E.  
JUPITER FL 33477**

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.

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **D Howard**  
STREET ADDRESS **ALDEN SYNNOTT, PRISCILLA**  
CITY-ST-ZIP **114 CORAL FISH LANE EAST  
JUPITER FL 33477**

TITLE ☐ Change ☐ Addition  
NAME **D/P**  
STREET ADDRESS **Howard, Priscilla Alden**  
CITY-ST-ZIP **114 Coral Fish Lane East  
Jupiter, Florida 33477**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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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

Date

Daytime Phone #

CR2E034 (10/00)

attachment  
# P98000045853

**Randee S. Schatz, P.A.**

*Attorney at Law*

*220 Sunrise Avenue, Suite 209*

*Palm Beach, Florida 33480*

*Telephone (561) 833-1846*

*Fax (561) 833-1881*

*E-Mail RSchatz@compuserve.com*

February 27, 2001

Division of Corporations

Annual Reports Filing

P.O. Box 1500

Tallahassee, FL 32302-1500

Re: Talewins, Inc.

Document # P98000045853

CERTIFIED/RETURN RECEIPT REQUESTED

Dear Sir/Madam:

Enclosed please find the completed 2001 Uniform Business Report, along with the filing fee in the amount of \$150.00 regarding Talewins, Inc.

If there are any questions, please feel free to contact my office.

Sincerely yours,



Randee S. Schatz

RSS:pnw

Enclosures

cc: Priscilla Howard