

**FILED****Jul 12, 2001 8:00 am  
Secretary of State**06-14-2001 90012 039 \*\*\*150.00  
07-12-2001 90122 049 \*\*\*400.00**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P98000057449**

1. Entity Name

**NECESSARY VENTURES, INC.**

Principal Place of Business

**1400 PEREGRINE PT. DR.  
SARASOTA FL 34231**

Mailing Address

**1400 PEREGRINE PT. DR.  
SARASOTA FL 34231**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **65-0846197**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**LONSDALE, ROBERT D  
1400 PEREGRINE PT. DR.  
SARASOTA FL 34231**

7. Name and Address of New Registered Agent

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 **D** ☐ Delete  
NAME **LONSDALE, ROBERT D**  
STREET ADDRESS **1400 PEREGRINE PT. DR.**  
CITY-ST-ZIP **SARASOTA FL 34231**TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE **D** ☐ Delete  
NAME **LONSDALE, KRISTY K**  
STREET ADDRESS **1400 PEREGRINE PT. DR.**  
CITY-ST-ZIP **SARASOTA FL 34231**TITLE ☐ Change ☐ Addition  
NAME  
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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: *Robert D Lonsdale*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5/31/01**

Date

Daytime Phone #

DOCUMENT # P98000057449

SUPLEE & SHEA, P.A.  
CERTIFIED PUBLIC ACCOUNTANTS

COO73252

T. Raymond Suplee, CPA  
Norman J. Shea, III, CPA  
Thomas R. Cramer, CPA  
Joseph E. Rocklein, III, CPA

June 4, 2001

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Necessary Ventures, Inc.  
DOC# P98000057449  
TIN: 65-08461987

Ladies and Gentlemen:

Enclosed please find the 2001 Uniform Business Report (UBR) for the referenced corporation along with a check in the amount of \$150.00.

We respectfully request you accept this as payment in full, as the late filing of this report was an oversight and at no time was there any intent not to timely file the report. The accountant responsible for timely preparing this report left our employ suddenly and the report was placed in the files. As soon as we realized the report was past due, we immediately completed it. We have enclosed a copy of our internal billing sheet showing the initial date of processing the report was April 18, 2001.

Thank you for your consideration in this matter. If you have any questions or need additional information, please do not hesitate to contact me.

Sincerely,

*T. Raymond Suplee* *TRW*

T. Raymond Suplee, CPA

TRS/nw

Enclosures