

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P98000060115**

1. Entity Name
JOAN T. COOK & ASSOCIATES, INC.

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90084 015 ***150.00

Principal Place of Business Mailing Address
462 DEWAR'S COURT 462 DEWAR'S COURT
WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708
US US

040100



DO NOT WRITE IN THIS SPACE

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 **59-3519712** 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

COOK, JOAN T
462 DEWAR'S COURT
WINTER SPRINGS FL 32708

Name
Street Address (P.O. Box Number is Not Accepted)
City 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 of person or persons authorized to register agent and the corporation) (NOTE: Registered Agent signature required on first filing) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **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 2001		
TITLE	☐ Delete		TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY, ST, ZIP			CITY, ST, ZIP		
TITLE	☐ Delete		TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY, ST, ZIP			CITY, ST, ZIP		
TITLE	☐ Delete		TITLE	☐ Change	☐ Addition
NAME			NAME		
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CITY, ST, ZIP			CITY, ST, ZIP		
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CITY, ST, ZIP			CITY, ST, ZIP		
TITLE	☐ Delete		TITLE	☐ Change	☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY, ST, ZIP			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)(g), 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joan T. Cook / JOAN T. COOK 4/26/01 407-327-3601
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone

CR2E034 (10/00)