

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 28, 2001 8:00 am**  
**Secretary of State**

04-28-2001 90035 007 \*\*\*150.00

0234778

**DOCUMENT # P98000067901**

1. Entity Name

**TIMOTHY C. ANDERSEN, INCORPORATED**

Principal Place of Business

11752 COTTONWOOD AVENUE  
PALM BEACH GARDENS FL 33410

Mailing Address

11752 COTTONWOOD AVENUE  
PALM BEACH GARDENS FL 33410

751110

2. Principal Place of Business

2430 24th Lane

Suite, Apt. #, etc.

3. Mailing Address

2430 24th Lane

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Palm Beach Gardens, FL

Zip

33418

Country

U.S.

City & State

Palm Beach Gardens, FL

Zip

33418

Country

U.S.

4. FEI Number

65-0863573

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ANDERSEN, TIMOTHY C  
11752 COTTONWOOD AVENUE  
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent

Name Timothy C. Andersen

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

2430 24th Lane

City

Palm Beach Gardens, FL

Zip Code

33418

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

TITLE D ☐ Delete  
NAME ANDERSEN, TIMOTHY C  
STREET ADDRESS 11752 COTTONWOOD AVENUE  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE D ☐ Delete  
NAME ANDERSEN, DEBORAH P  
STREET ADDRESS 11752 COTTONWOOD AVENUE  
CITY-ST-ZIP PALM BEACH GARDENS FL 33410

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition  
NAME Timothy C. Andersen  
STREET ADDRESS 2430 24th Lane  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE D ☒ Change ☐ Addition  
NAME Deborah P. Andersen  
STREET ADDRESS 2430 24th Lane  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
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

Timothy C.  
ANDERSEN

Date

4/27/01

Daytime Phone #

561  
635-5265

CR2E034 (10/00)