

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 08, 2002 8:00 am
Secretary of State

09-08-2002 90090 044 ***150.00

DOCUMENT # P98000072976

1. Entity Name
KANE FIELD SERVICES, INC.

Principal Place of Business

**3560 MONTEIGNE DRIVE
PENSACOLA FL 32504**

Mailing Address

**3560 MONTEIGNE DRIVE
PENSACOLA FL 32504**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3532196**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**KANE, JULIE W
3560 MONTEIGNE DRIVE
PENSACOLA FL 32504**

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. 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

TITLE **D** ☐ Delete
NAME **KANE, JULIE W**
STREET ADDRESS **3560 MONTEIGNE DRIVE**
CITY-ST-ZIP **PENSACOLA FL 32504**

TITLE **D** ☐ Delete
NAME **KANE, TIMOTHY D**
STREET ADDRESS **3560 MONTEIGNE DRIVE**
CITY-ST-ZIP **PENSACOLA FL 32504**

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/4/02 850-433-7316
Date Daytime Phone #

CR2E034 (4/02)

Attachment

#P98000072976

**KANE FIELD SERVICES, INC.
3560 MONTEIGNE DRIVE
PENSACOLA, FLORIDA 32504**

850-433-7316

September 4, 2002

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

To whom it may concern:

Enclosed is our corporate 2002 Uniform Business Report together with our check in the amount of \$150 made payable to the Secretary of State. We respectfully request the abatement of the \$400 late filing fee. The corporation never received the original Uniform Business Report that was due earlier this year.

Thank you for your consideration in this matter. Should you require further information, please contact me.

Very truly yours,



Julie W. Kane, President

Enclosure