## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## Sep 06, 2001 8:00 am Secretary of State P98000095399 **DOCUMENT #** 1. Entity Name 09-06-2001 90261 001 \*\*\*150.00 RICHARD M. BRAKEFIELD, INC. Principal Place of Business Mailing Address 412 E MADISON ST. SUITE 1110 412 E MADISON ST. SUITE 1110 **TAMPA FL 33602** TAMPA FL 33602 Principal Place of Business StreetNE Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-354 1965 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRAKEFIELD, RICHARD M 412 E MADISON ST. SUITE 1110 TAMPA FL 33602 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 applic legistered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME BRAKEFIELD, RICHARD M NAME 319 1St Street NE 412 E MADISON ST. SUITE 1110 STREET ADDRESS STREET ADDRESS 33570 **TAMPA FL 33602** CITY-ST-ZIP CITY-ST-ZIP RUSKIN FL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME -----STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ 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 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

attachment 80063900

## Richard M. Brakefield, Inc. 319 1<sup>st</sup> Street NE Ruskin, FL 33570

· August 22, 2001

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

To Whom It May Concern:

I am enclosing the 2001 Uniform Business Report with changes to my address as well as a check for \$150.00. I never received the first mailing of the UBR and would appreciate if you would accept the original fee as payment in full. My office has moved and perhaps that is why I never received it.

Thank you in advance for your understanding.

Sincerely,

Richard M. Brakefield