

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000096490

1. Entity Name
RIC KEITH, INC.

FILED
May 04, 2001 8:00 am
Secretary of State
05-04-2001 90037 043 ***158.75

Principal Place of Business
7129 CRESCENT WAY
COCONUT CREEK FL 33063

Mailing Address
7129 CRESCENT WAY
COCONUT CREEK FL 33063

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

9120 WILES RD

City & State
CORAL SPRING FL

Zip
33067

Country

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 65-0882315

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

Name KOEHLER, RICK F.

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

7129 CRESCENT CREEK WAY

City COCONUT CREEK FL Zip Code 33073

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 *Rick F. Koehler* RICK F. KOEHLER

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
NAME KOEHLER, RICK F
STREET ADDRESS 2532 JARDIN DRIVE
CITY-ST-ZIP WESTON FL 33327 ☐ Delete

TITLE D
NAME KOEHLER, RICK F ☒ Change ☐ Addition
STREET ADDRESS 7129 CRESCENT CREEK WAY
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 files empowered.

SIGNATURE: *Rick F. Koehler*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-01/1954) 340-1300
Date Daytime Phone #

CR2E034 (10/00)