

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90077 042 ***150.00

DOCUMENT # P98000098240

1. Entity Name
YOUR INFO SOURCE, INC.

Principal Place of Business
3885 BELLE VISTA DRIVE E
SAINT PETE BEACH FL 33706

Mailing Address
3885 BELLE VISTA DRIVE E
SAINT PETE BEACH FL 33706

979809



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
7503 GRAND BLVD
 Suite, Apt. #, etc.

3. Mailing Address
PO Box 1804
 Suite, Apt. #, etc.

City & State
PORT RICHEY FL

City & State
NEW PORT RICHEY FL

4. FEI Number **59-3546899**

Applied For
 Not Applicable

Zip Country
34668 USA

Zip Country
34656 USA

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

6. Name and Address of Current Registered Agent

CUNNINGHAM, KENNETH A
3885 BELLE VISTA DRIVE E
SAINT PEACH BEACH FL 33706

Name
KENNETH A. CUNNINGHAM
 Street Address (P.O. Box Number is Not Acceptable)
7503 GRAND BLVD

City **PORT RICHEY FL** Zip Code **34668**

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 **KENNETH A. CUNNINGHAM PRESIDENT**

9 SEP 02

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 **P** ☐ Delete
 NAME **CUNNINGHAM, KENNETH A**
 STREET ADDRESS **3885 BELLE VISTA DR EAST**
 CITY-ST-ZIP **SAINT PETERSBURG BEACH FL 33706**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☒ Change ☐ Addition
 NAME **KENNETH A. CUNNINGHAM**
 STREET ADDRESS **7503 GRAND BLVD**
 CITY-ST-ZIP **PORT RICHEY FL 34668**

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

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

CR2E034 (4/02)

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: **KENNETH A. CUNNINGHAM PRESIDENT**

9 SEP 02 727-859-0311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



Attachment

*929809
P98000098240*

Division of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee, FL 32302-1500

September 9, 2002

Dear Sir or Madam:

This is a request to waive the \$400 late fee for filing the UBR for the year 2002. Unfortunately, the first notice was not received, probably due to our recent change of address.

Please accept my apologies. Enclosed is the original fee of \$150.00.

Yours truly,

Kenneth A. Cunningham
President