## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P9900003760** 

JOHN A. TULLOUS, INC.

## **FILED** Jul 28, 2000 8:00 am Secretary of State

07-28-2000 90150 024 \*\*\*150.00

Principal Place of Business Mailing Address

4200 HARGILL DR

4200 HARGILL DR

ORLANDO FL 32806		ORLANDO FL 32806		U007520E			
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z. Principal Pi	lace of Business	3. Mailing Address			NAL <b>as</b> iik <b>1</b> 31 <mark>08</mark> 1811 191 <b>3 9</b> 08		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State	<u>-</u>	4. FELMumber 3550299 Applied For Not Applied For			
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Addit		
~—	6. Name and Address of Curr	ent Registered Agent	<del></del>	7. Name and Address of New Reg	<del></del>		
			Name				
TULLOUS, MELISSA K 4200 HARGILL DR ORLANDO FL 32806			Street Addre	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.  SIGNATURE							
SIGNATORIE _	Signature, typed or printed name of registered a	gent and title if applicable. (N	OTE: Registered Agent signature re-	quired 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!!! FI After SEPTEMBER 13, 20 Make Check Payable to						May Be o Fees	
11	OFFICERS A	ND DIRECTORS	12.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TULLOUS, JOHN A 4200 HARGILL DR ORLANDO FL 32806	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD TULLOUS, MELISSA K 4200 HARGILL DR ORLANDO FL 32806	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition	
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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 redeiver 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.

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To whom it may concern,

This is my first time having to do this UBR form I was unaware that we were required to do this. When I received this form I called your office for instruction of what it was for and was told that I need to "Register with the State", and that I should have received this form in January. Unfortunatry I just received it yesterday, but to the cincumstances and that this is my first time I pray that you will forgive me the additional to 400.00 and accept the enclosed check for \$150.00 which I understand would have been the fee if I had reported before May which I'm sure I would have done had I received the form.

With My Sincele Apologies
and Much Appleciation
Melissa Tullous