

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000014019

1. Entity Name
BRITTON & ASSOCIATES, INC.

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90427 034 ***150.00

Principal Place of Business
**37700 MERIDIAN AVENUE
DADE CITY FL 33525**

Mailing Address
**37700 MERIDIAN AVENUE
DADE CITY FL 33525**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3560193**

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

**AUVIL, JON L
37837 MERIDIAN AVENUE
SUITE 314
DADE CITY FL 33525**

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.

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 \$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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BRITTON, KATHERINE H
37700 MERIDIAN AVENUE
DADE CITY FL 33525**

☐ Delete

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

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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 like empowered.

SIGNATURE: *Katherine Hornuth Britton* **KATHERINE HORNUTH BRITTON**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-301 (352) 567-5155
Date Daytime Phone #

CF2E034 (10/00)

#J88902 Attachment

511716

INSTRUCTION TO TAXPAYER
(NOT TO BE MAILED WITH REPORT)

MAIL CHECK FOR \$ <u>150.00</u> to		FED	STATE	IN PAYMENT OF
1	Internal Revenue Service Atlanta, GA 39901			F.I.C.A. and Withholding Tax
2	Your Bank			Corporate Income Tax
3	State of Florida Department of Revenue Tallahassee, FL 32399			Surcharge Report
4	Department of Labor Division of: Employment Security Tallahassee, FL 32399-0212			Unemployment Tax
5	Secretary of State Tallahassee, FL			W3 / W2's
6	Social Security Administration Wilkes - Barre, PA 18769			Sales Tax
7	Property Appraiser			1096 / 1099's
8	Division of Alcohol			Tangible Tax
				Intangible Tax
				Interest And / Or Penalty
				Other: <u>Annual Report</u>
				Special Instructions: Be sure to sign & Date attached form.

BE SURE REPORT IS DATED AND SIGNED BY

MAIL ON OR BEFORE

5-1-01

Officer
at
Bottom
#13