

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000014130

1. Entity Name

ROBINSON ACCOUNTING OF AMERICA INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90168 017 ***150.00

Principal Place of Business

1999 W. COLONIAL DR.
ORLANDO FL 32804

Mailing Address

1999 W. COLONIAL DR.
ORLANDO FL 32804-7045

2. Principal Place of Business

1801 E. Colonial Dr

3. Mailing Address

1801 E. Colonial Dr.

Suite, Apt. #, etc.

107

Suite, Apt. #, etc.

STE 107

City & State
Orlando, FL

City & State
Orl. FL

4. FEI Number

59-3561071

Applied For

Not Applicable

Zip
32803

Country
USA

Zip
32803

Country
USA

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

ROBINSON, MAURICE
1999 W. COLONIAL DR.
ORLANDO FL 32804

Name ROBINSON, MAURICE

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

1801 E. Colonial Dr. STE 107

City Orlando, FL Zip Code 32803

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

Barbara J. Robinson

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/13/00

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, 2000 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 DP ☐ Delete
NAME ROBINSON, FRANKIE B
STREET ADDRESS 1999 W. COLONIAL DR.
CITY-ST-ZIP ORLANDO FL 32804

TITLE ☒ Change ☐ Addition
NAME 1801 E. Colonial Dr. STE 107
STREET ADDRESS Orl. FL 32803
CITY-ST-ZIP

TITLE V ☐ Delete
NAME ROBINSON, BARBARA
STREET ADDRESS 1999 W. COLONIAL DR.
CITY-ST-ZIP ORLANDO FL 32804

TITLE ☒ Change ☐ Addition
NAME 1801 E. Colonial Dr. STE 107
STREET ADDRESS Orlando, FL 32803
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)