

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91560 047 ***150.00

DOCUMENT # P99000014200

1. Entity Name

ASSOCIATED HOLDINGS, INC.

Principal Place of Business

Mailing Address

**245 10TH AVENUE NORTH
 SAFETY HARBOR FL 34695**

**245 10TH AVENUE NORTH
 SAFETY HARBOR FL 34695**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3560563**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certification Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NASH, THOMAS C II
 625 COURT STREET, SUITE 200
 CLEARWATER FL 33756**

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
 Just Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **FRANCIS HOOKS, BILLY**
 STREET ADDRESS **245 10TH AVENUE NORTH**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

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

TITLE **STD** ☐ Delete
 NAME **MARY HOOKS, MELODY**
 STREET ADDRESS **245 10TH AVENUE NORTH**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

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

TITLE ☐ Delete
 NAME
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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:

Melody M. Hooks **Melody Hooks**

May 10, 2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

ASSOCIATED HOLDINGS, INC.

245 10TH AVENUE N.

SAFETY HARBOR, FL 34695

#P000014201
767354

DEPARTMENT OF STATE:

THIS LETTER IS TO EXPLAIN WHY I DID NOT SEND IN MY REGISTRATION FEE OF 150.00 BY THE 1ST OF MAY. WHEN I WAS FILLING OUT THIS FORM, IT WAS AROUND TAX TIME. I SAW THE DATE IN THE MIDDLE OF THE PAGE ON THE FRONT OF THIS FORM AND MY MIND READ THE 15TH OF MAY INSTEAD OF THE 1ST. I AM SENDING THE 150.00 PAYMENT NOW HOPING THAT YOU WILL HAVE MERCY ON ME AS I HAVE ALWAYS BEEN ON TIME WITH MY PAYMENT FEES IN THE PAST. THANK YOU.

SINCERELY,

Melody Hooks

MELODY HOOKS
SECRETARY