

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 04, 2002 8:00 am**  
**Secretary of State**

07-04-2002 90562 025 \*\*\*150.00

DOCUMENT # **799000017048**

1. Entity Name

**Faye's Porcelain Studio, Inc.**

**DO NOT WRITE IN THIS SPACE**

**80127022**

2. Principal Place of Business

**5678 Colcord Ave**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Jacksonville, FL**

City & State

4. FEI Number

**59-356499**

Applied For

Not Applicable

Zip

**32211**

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

7. Name and Address of Current Registered Agent

Name

**FAYE MCKEE**

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

**5678 Colcord Ave**

City

**JACKSONVILLE**

**FL**

Zip Code

**32211**

**DO NOT WRITE  
IN THIS SPACE**

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

*Faye McKee*

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

(NOTE: Registered Agent signature required when reinstating)

**06/21/02**

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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	<b>D/P</b>
NAME	<b>FAYE MCKEE</b>
STREET ADDRESS	<b>5678 Colcord Ave</b>
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32211</b>
TITLE	<b>T</b>
NAME	<b>CHARLES MCKEELAND</b>
STREET ADDRESS	<b>5678 Colcord Ave</b>
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32211</b>
TITLE	<b>S</b>
NAME	<b>William McKee</b>
STREET ADDRESS	<b>5678 Colcord Ave</b>
CITY-ST-ZIP	<b>JACKSONVILLE, FL 32211</b>
TITLE	
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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Faye McKee*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**06/21/02**

Date

Daytime Phone #

CR2E034B (12/01)

Attachment  
P99000017048

# TAX ADVANTAGE

Income Tax Services  
Financial & Insurance Services  
Accounting & Bookkeeping Services

JAMES K. REESE, EA  
LYN BOGLI, ACCOUNTANT

1201 North Third Street • Jacksonville Beach, Florida 32250 • (904) 241-0050 • Fax (904) 241-0752

June 25, 2002

Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32302

Re: Faye's Porcelain Studio, Inc. - 2002 Uniform Business Report  
Doc. #: P99000017048

Dear Sir or Madam:

The above referenced Taxpayer never received the original preprinted Uniform Business Report for the above referenced period. As soon as we learned no report was on file for 2002 we completed the enclosed blank report and check to forward to your office. We are asking your assistance in filing and abating any Late Filing Penalties concerning the 2002 Report. Your cooperation and understanding is appreciated in advance.

If you have any questions, please do not hesitate to contact me.

Sincerely,



James K. Reese, EA

Enclosures:  
Check for \$150.00  
2002 Uniform Business Report