

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

04-11-2002 90727 021 ***150.00

0095334 AV

DOCUMENT # P99000017138

1. Entity Name

BARBARA M. ANDERSON, M.A., P.A.

Principal Place of Business

**1635 E. ROBINSON STREET
 ORLANDO FL 32803**

Mailing Address

**1635 E. ROBINSON STREET
 ORLANDO FL 32803**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3570934

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**BOGNER, JAMES B
 225 E. ROBINSON STREET
 SUITE 600
 ORLANDO FL 32801**

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, 2002 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 ANDERSON, BARBARA M 1016 TUSCANY PLACE WINTER PARK FL 32789	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: Barbara M. Anderson
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/02
 Date

407 644 4452
 Daytime Phone #

CR2E034 (9/01)



Florida Intangible Personal Property Tax Notice for 2002

Corporate and Partnership Filers

828630

Attachment # P9100005718

You will NOT be mailed a tax return packet this year.

Why? Your filing history indicates you may not owe tax in 2002.

Use this worksheet to verify that you do not owe tax.

Tax Calculation Worksheet	
Enter Total Taxable Intangible Assets	\$ 0.00
Multiply by Tax Rate	x .001
Total Tax Due	\$ 0.00

If your Total Tax Due is less than \$60, you do not have to pay tax.

Notify the Department of your zero (0) tax obligation.

Corporations, partnerships, and affiliated groups are required to notify the Department of a zero tax obligation. Information reports are also required if you choose to pay as agent for your shareholders.

Beginning with the 2002 tax year, the Department will accept an electronic notification in lieu of a paper filing, if no tax is due.



From your touchtone phone, dial
1-800-550-6713 and follow the prompts.



Go to www.myflorida.com/dor, click on the
e-Services icon, and follow the prompts.

If your Total Tax Due is \$60 or more, you need to file Form DR-601C and pay the tax due.

You may obtain the return and instructions at www.myflorida.com/dor

Need forms mailed to you?

Order forms at: www.myflorida.com/dor/forms

Fax your request to 850-922-2208.

Call the DOR Distribution Center at 850-488-8422.

Mail your form request to:

Distribution Center
Florida Department of Revenue
168A Blountstown Hwy
Tallahassee FL 32304-3702

Need Assistance?

To speak with a Department of Revenue
representative, call Taxpayer Services, Monday
through Friday, 8 a.m. to 7 p.m., ET, at
1-800-352-3671 (in Florida only) or 850-488-6800.

Hearing or speech impaired persons may call the
TDD line at 1-800-367-8331 or 850-922-1115.