

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

Page 1 of 2

DOCUMENT # **P99000023647**

1. Entity Name

Florida E-Commerce Association, Inc.

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

02 OCT 22 AM 10:51

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1109 CARISSA Drive

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Zip

U.S.A.

Zip

Country

4. FEI Number

#59-3584055

Applied For

Not Applicable

5. Certificate of Status Desired

☒

**\$8.75 Additional
Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Valerie L. Peacock

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

1109 CARISSA Drive

City

Tallahassee

FL

Zip Code

32308

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

Oct 22, 2002

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 **PSD**
NAME **CEO**
STREET ADDRESS
CITY - ST - ZIP
Valerie L. Peacock
1109 CARISSA Drive
Tallahassee, FL 32308

TITLE
NAME
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CITY - ST - ZIP

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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 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 #

Oct. 22, 2002

CR2E034B (12/01)

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To: Florida Division of Corporations

Date: October 22, '2002

Re: Reinstatement of Corporation

To Whom It May Concern:

Before
May 1, 2002

For many years I have always timely and personally delivered the Corporation's Annual Report by hand to the Front Desk of the Division of Corporations Office in Tallahassee, FL. This year, upon receiving the Annual Report, UBR, the information was timely signed, a single check was attached for all, and submitted by mail along, with others, in a single envelope to the Division of Corporations. It has just come to our attention that the submission was obviously lost in the mail, and we are requesting that the following attached corporation be reinstated.

Your kind assistance in this matter is appreciated.

Sincerely,


Valerie L. Peacock
President