## 2000 UNIFORM BUSINESS REPORT (UBR)

ith an address, with all other like empowered

changed, or on an attachment

## FILED Aug 29, 2000 8:00 am Secretary of State DOCUMENT # P99000029697 1. Entity Name AMMIE R. COLLEY, P.A. 08-29-2000 90003 047 \*\*\*150.00 Mailing Address -Principal Place of Business 512 18TH STREET NORTH 512 18TH STREET NORTH JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250 HUUUALUOO 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Numbe Applied For City & State City & State Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COLLEY, AMMIE Street Address (P.O. Box Number is Not Acceptable) 512 18TH STREET NORTH JACKSONVILLE BEACH FL 32250 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00. 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After:SEPTEMBER-13:2000:Min:-will-be:\$750.00: Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DPST TIT! F Change Maddition Addition TITLE ☐ Delete COLLEY, AMMIÉ NAME NAME STREET ADDRESS 512 18TH STREET NORTH STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP JACKSONVILLE BEACH FL 32250 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE TITLE-☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-21P ☐ Addition ☐ Change ☐ Delete TITLE TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

August 7, 2000

Florida Dept. Of State Division of Corporations Tallahassee, Florida 32314

Re: Ref. # P99000029697

I just received your letter and my returned check for \$1'50:00. I just recently (August) received notice for payment. When I called your office I was told that the first notice was sent out in January, I have never received that notice to pay. I am prompt to pay all my debts on time and had I received the notice before, I certainly would have paid it in a timely manner. I would like for you to reconsider waiving the late fee (\$400.00) at this time and have my report filed as soon as possible. I can provide you a history of either early payment or definitely on time payment with all my bills. I regret that this has taken place and would to make everything right.

If you have any questions please call me at (904) 246-8250.

Thank you for your time and cooperation.

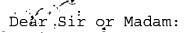
Sincerely,

Ammie Colley

Enclosures;

2000 Uniform Business Report

Check for \$150.00





attachment Doc # pag 0000294929

Income Tax Services
Financial & Insurance Services
Accounting & Bookkeeping Services

JAMES K. REESE, EA RICHARD L. ROSS, EA

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

July 13, 2000

Division of Corporations Post Office Box 6327 Tallahassee, FL 32302

Re: Ammie R. Colley, P.A. - 2000 Uniform Business Report

Dear Sir or Madam:

We are in receipt of your 2000 Uniform Business Report and are asking your assistance in accepting the enclosed check for \$1,50,00 and the completed report. The Taxpayer is a first year filer and thought the report was due at the same time as their Federal Tax Return which is on extension. When we first learn this had not been completed, we finalized and mailed to your attention. 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: 2000 Uniform Business Report Check for \$150.00



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

August 17, 2000

59-3569733

AMMIE R. COLLEY, P.A. 512 18TH STREET NORTH JACKSONVILLE BEACH, FL 32250

SUBJECT: AMMIE R. COLLEY, P.A. Ref. Number: P99000029697

We have received your document for AMMIE R. COLLEY, P.A. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

Pursuant to you letter, our office will grant you a one time only waiver. Please make the following corrections:

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800)829-1040.

TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION, PLEASE RETURN THE CORRECTED REPORT TO THIS OFFICE WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 487-6059.

Michelie Milligan **Document Specialist** 

Letter Number: 200A00044311