

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90026 039 ***150.00

DOCUMENT # P99000034761

1. Entity Name

A LITTLE CONSULTING, INC. ✓

Principal Place of Business

Mailing Address

2. Principal Place of Business

4705 Montgomery Avenue

Suite, Apt. #, etc.

3. Mailing Address

4705 Montgomery Avenue

Suite, Apt. #, etc.

City & State

Downers Grove, Illinois

City & State

Downers Grove, Illinois

4. FEI Number

59-3573267

Applied For

Not Applicable

Zip

60515

Country

U.S.

Zip

60515

Country

U.S.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Amy Little

9208 Pine Island Court

Tampa, Florida 33647

7. Name and Address of New Registered Agent

Name

Bruce J. Sperry

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

Bruce J. Sperry, P.A.

1003 South Alexander Street, Suite 1

City
Plant City

FL

Zip Code
33566

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)

2/28/01

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
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/S/T/D
NAME Amy T. Little
STREET ADDRESS 4705 Montgomery Avenue
CITY-ST-ZIP Downers Grove, Illinois 60515 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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

Amy T. Little
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 AMY T. LITTLE, President

2-23-01

Date

(630)353-1789

Daytime Phone #

CR2E034 (11/00)