

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000044757

1. Entity Name

AMERICAN TAX SERVICE OF NAPLES, INC.

FILED
Sep 06, 2000 8:00 am
Secretary of State

09-06-2000 90089 009 ***150.00

Principal Place of Business

9961 BOCA CIR.
NAPLES FL 34109

Mailing Address

9961 BOCA CIR.
NAPLES FL 34109

2. Principal Place of Business

141 WADING BIRD CIR

3. Mailing Address

P.O. Box 110732

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

NAPLES, FL

Zip

34110

Country

USA

Zip

34108

Country

USA

4. FEI Number

65-0921740

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KONERT, BRADD R
9961 BOCA CIR.
NAPLES FL 34109

7. Name and Address of New Registered Agent

Name

KONERT, BRADD R.

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

141 WADING BIRD CIR #104

City

NAPLES

FL

Zip Code

34110

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

Bradd R Konert

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 \$550.00

After SEPTEMBER 13, 2000 Min. will be \$750.00.
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 PTD
NAME KONERT, BRADD R
STREET ADDRESS 9961 BOCA CIR.
CITY-ST-ZIP NAPLES FL 34109 ☐ Delete

TITLE VSD
NAME KONERT, LORETTA J
STREET ADDRESS 9961 BOCA CIR.
CITY-ST-ZIP NAPLES FL 34109 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD
NAME KONERT, BRADD R.
STREET ADDRESS 141 WADING BIRD CIR #104
CITY-ST-ZIP NAPLES, FL 34110 ☒ Change ☐ Addition

TITLE VSD
NAME KONERT, LORETTA J.
STREET ADDRESS 141 WADING BIRD CIR #104
CITY-ST-ZIP NAPLES, FL 34110 ☒ Change ☐ Addition

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

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

TITLE
NAME
STREET ADDRESS
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:

Bradd R Konert

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/29/00

Date

941-592-5550

Daytime Phone #

CR2E034 (5/00)

Attachment doc #
P99000044757
A0075394

AMERICAN TAX SERVICE OF NAPLES, INC.
141 Wading Bird Circle, #104
Naples, FL 34110

August 29, 2000

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

Enclosed is my check for \$150.00 for the Uniform Business Report. I am requesting that you waive the penalty since my business has moved and I did not receive any previous notification of the fees due. This is my first year of incorporation so I was not expecting this at a certain date.

Thank you for your consideration,



Bradd R. Konert
President