

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

**FILED**  
**Sep 09, 2004 8:00 am**  
**Secretary of State**

09-09-2004 90011 042 \*\*\*150.00

**DOCUMENT #** P99000048992

**1. Entity Name**

Toby Neverett Auctioneers, Inc.



**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

23097 SW 59 WAY

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**City & State**

Boca Raton, FL

**City & State**

**4. FEI Number**

65-0988787

**Applied For**

Not Applicable

**Zip**

33428

**Country**

US

**Zip**

**Country**

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
Fee Required**

**7. Name and Address of Current Registered Agent**

**Name**

Neverett, Toby W.

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

23097 SW 59 WAY

**City**

Boca Raton, FL 33428

**FL**

**Zip Code**

**DO NOT WRITE  
IN THIS SPACE**

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing  
Trust Fund Contribution.** ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** Director President  
**NAME** Toby W. Neverett  
**STREET ADDRESS** 23097 SW 59 Way  
**CITY-ST-ZIP** Boca Raton, FL 33428

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IN THIS SPACE**

**12. 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 10 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 #

CR2E034B (12/02)

ATTACHMENT 24084209  
# P99000048992  
**Arnold M. Gotthilf**  
ACCOUNTANTS & TAX CONSULTANTS

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State of Florida  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re : Toby Neverett Auctioneers, Inc. Annual Report

Dear Sirs:

Enclosed is the Annual Report and a check for \$150.00 for the above referred to Corporation.

We previously phoned your office to request that an Annual Report be sent to us because it had not received been received before this.

We were told that the form would be mailed to us and to complete it and return it with a check for \$150.00, and request that the penalty be waived.

We respectfully request that the penalty be waived.

Very truly yours,

  
Arnold M. Gotthilf