## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P99000052882**

1. Entity Name

J. BALLARD & ASSOCIATES, INC.



FILED Aug 08, 2000 8:00 am Secretary of State 08-08-2000 90010 013 \*\*\*150.00

Principal Place of Business

Mailing Address

761 GOLDWATER COURT MAITLAND FL 32751

SIGNATURE

(See criteria on back)

761 GOLDWATER COURT MAITLAND FL 32751

2. Principal Place of Business

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State



DATE

DO NOT WRITE IN THIS SPACE

City & State

City & State

Zip

Country

Zip

6. Name and Address of Current Registered Agent

4. FEI Number 59-357467 Applied For Not Applicable

\$8.75 Additional

Fee Required.

5. Certificate of Status Desired Fee.

BALLARD, JOHN F 761 GOLDWATER COURT MAITLAND FL 32751

7. Name and Address of New Hegistered Agent				
Name				
Street Address (P.O. Box Numbe	r is Not Acceptable)			
· · · · · · · · · · · · · · · · · · ·				
City		FL	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.

This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.

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

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

(NOTE: Registered Agent signature required when reinstating)

Country

**10.** Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change Addition ☐ Delete TITLE TITLE BALLARD, JOHN F NAME NAME **761 GOLDWATER COURT** STREET ADDRESS STREET ADDRESS MAITLAND FL 32751 CITY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE □ Defete TITI F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Delete ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IE

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 a other like empowered.

SIGNATURE:

ATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-644,5800

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CR2E034 (5/00)

attachment # 199 000052882 Dw76966

7/26/2000

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

## Gentleman:

I am writing to you regarding a conversation I had today with Leslie pertaining to the filing of a Uniform Business Report. She advised me that since this is the first notification that I received to file this form, that I should send a check for \$150 instead of the \$550 requested on this document. I have included the recommended amount (\$150) and the properly filled out form.

Sincerely,

John F. Ballard

J. Ballard & Associates 761 Goldwater Court Maitland, Fl 32751