

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Aug 01, 2001 8:00 am**  
**Secretary of State**

08-01-2001 90202 036 \*\*\*150.00

**DOCUMENT # P99000058029**

1. Entity Name

**LAW OFFICES OF KEVIN S. GARRIS, P.A.**

Principal Place of Business

**3000 GULF TO BAY BLVD.  
 CLEARWATER FL 33759**

Mailing Address

**3000 GULF TO BAY BLVD.  
 CLEARWATER FL 33759**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3646773**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GARRIS, KEVIN S  
 3000 GULF TO BAY BLVD.  
 CLEARWATER FL 33759**

Name

Street Address (P.O. Box Number 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.

SIGNATURE

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 12, 2001 Fee 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete  
 NAME **GARRIS, KEVIN S**  
 STREET ADDRESS **3000 GULF TO BAY BLVD.**  
 CITY-ST-ZIP **CLEARWATER FL 33759**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 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:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-30-01**

Date

**(727) 797-5091**

Daytime Phone #

CR2E034 (5/01)

Attachment DOC# P990000058029-CL074715

LAW OFFICES of KEVIN S. GARRIS, P.A.

Attorney and Counselor at Law

3000 Gulf To Bay Blvd.  
Clearwater, FL 33759  
Phone: 727-797-5041  
Fax: 727-797-4933

8875 Hidden River Parkway, Suite 300  
Tampa, FL 33637  
Phone: 1-888-334-3436  
Fax: 727-797-4933

July 29, 2001

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

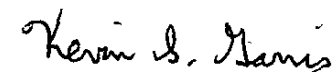
Re: Failure To Receive Notice of Uniform Business Report

To Whom It May Concern:

Please be advised that my office recently received notice that its Uniform Business Report is delinquent, resulting in additional fees. However, my office never received an initial request for payment.

I am enclosing the original fee of \$150.00 and would ask that the Department waive the additional fees. Thank you for your cooperation in this matter.

Sincerely,

  
Kevin S. Garriss, Esq.