

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000064033

1. Entity Name

DOUG CUTTS & ASSOCIATES INC.

FILED

00 AUG -2 AM 10:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

PO BOX 381
PALATKA FL 32178

PO BOX 381
PALATKA FL 32178-0381

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEE Number

59-3586858

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

KELLEY, CHRISTINE
723 JULIA ST.
PALATKA FL 32177

Name

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

600003383826-3

-09/06/00--01084--025

City

***150.00

***150.00

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 \$150.00
After MAY 1, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS KELLEY, CHRISTINE
CITY-ST-ZIP RT 4 BOX 1026
PALATKA FL 32177

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

TITLE ☐ Delete
NAME D
STREET ADDRESS KELLEY, GEORGE
CITY-ST-ZIP RT 4 BOX 1026
PALATKA FL 32177

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)

262

Trim Bookkeeping & Tax Service Inc.
6683 Crill Avenue
Palatka, Florida 32177
904-328-4164 Phone
904-325-0804 Fax

July 17, 2000

Advanced Appraisals & Consulting Inc.
P.O. Box 381
Palatka, Florida 32177

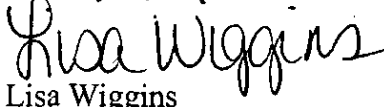
Doug Cutts & Associates Inc.
P.O. Box 381
Palatka, Florida 32177

Ref: Annual Report

To Whom It May Concern,

This letter is a request for abatement of the penalties on the two clients I have mentioned above. They brought me their annual reports in March around the same time I experienced a death in the family. After I reported back to work my employee who took the reports quit and didn't inform me they brought the reports in for me to look over and fill out. Then my client experienced a death in the family and was out of town. With all this going on she nor I once thought about the annual reports not being filed until she received the 2nd notice. She would have not intentionally not filed the reports. It would make more sense to only pay the \$150.00 than \$550.00 for each business. Please take this matter into consideration. Enclosed is a check for each business.

Thank you,



Lisa Wiggins
Accountant

LW

cc:file