

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

09-03-2002 90117 044 ***150.00

DOCUMENT # P99000073487

1. Entity Name
GRADIN, INC.

Principal Place of Business

**3239 OLEANDER AVENUE
 FT. PIERCE FL 34982**

Mailing Address

**3603 RIVER BIRCH DR
 FORT PIERCE FL 34981**

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 **65-0942788**

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

**SKIDMORE, PAMELA R
 3239 OLEANDER AVENUE
 FT. PIERCE FL 34982**

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. 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

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, 2002 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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PST
 SKIDMORE, PAMELA
 3603 RIVER BIRCH DR
 FT PIERCE FL 34987** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VP
 SKIDMORE, DOUG
 3603 RIVER BIRCH DR
 FT. PIERCE FL 34987** ☐ Delete

TITLE
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☐ 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)



August 28, 2002

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

RE: Document # P99000073487, n/o Gradin, Inc.

Dear Sir or Madam:

Enclosed please find my 2002 Uniform Business Report along with my check number 2166, in the amount of \$150.00.

This is the first notice that I received. I received this notice in the middle of July and put it with my August payments to make sure that it was received prior to September 13, 2002 as stated on the front of the notice. I have always paid the \$150.00 so was shocked to see that the fee had been raised to \$550.00 without notice.

I called your office and spoke with "Drew". I explained to her the above and that I had not received a previous notice. She advised me that I should send the forms and a check for \$150.00, along with this letter stating the situation.

If you have any questions, or need further information, please feel free to contact me. All addresses on file are correct or by phone, during the day at 1-772-464-4387, evenings and weekends 1-772-464-1534.

Thank you for your consideration in this matter.

Sincerely,

Pamela R. Skidmore
President