

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P99000082598**

1. Entity Name

**AUTHORIZED CLEANING & RESTORATION, INC.**

Principal Place of Business

5697 SARA AVENUE #4  
SARASOTA FL 34233

Mailing Address

5697 SARA AVENUE #4  
SARASOTA FL 34233

2. Principal Place of Business

780 N. Tamiami Trail  
Suite, Apt. #, etc.

3. Mailing Address

780 N. Tamiami Trail  
Suite, Apt. #, etc.

City & State

Nokomis, FL

City & State

Nokomis, FL

Zip

34225

Country

USA

Zip

34225

Country

USA

4. FEI Number

65-0948896

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

PREWETT, DANIEL L

5777 BENEVA ROAD SOUTH

SARASOTA FL 34233

7. Name and Address of New Registered Agent

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITTINGTON, BRENDA 5697 SARA AVENUE #4 SARASOTA FL 34233	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D-P/T Whittington, Brenda 3736 ALOHA ST. NORTH PORT FL 34286	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, VP/IS Whittington Randall 3736 ALOHA ST. NORTH PORT FL 34286	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FILED**  
**Aug 21, 2002 8:00 am**  
**Secretary of State**

08-06-2002 90277 042 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)


*Attachment*  
AUTHORIZED CLEANING & RESTORATION, INC.  
780 N. TAMiami TRAIL  
NOKOMIS, FL 34275  
(941) 926-1367

41867

~~July 29, 2002~~

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

Re: Authorized Cleaning & Restoration, Inc.  
P99000082598

Dear Sir or Madam, 

Please find the enclosed Annual Report for the above-referenced corporation. In July 2001, we changed locations and never received the renewal notice for tax year 2002.

Our accountant brought our attention to this fact while he was performing an audit on our records. There was no intentional disregard for our responsibility to file. Therefore, we respectfully request an abatement of all penalties and reinstatement of our corporation.

Thank you for your assistance in this matter. If you have any questions or concerns, please do not hesitate to call me.

Best regards,

  
Randall C. Whittington, President

Enclosure