

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000091726

FILED
Apr 01, 2002 8:00 AM
Secretary of State

Entity Name: A/C BY MCCAMISH & SONS INC.

Current Principal Place of Business:

1800 51ST ST. S.W.
NAPLES, FL 34116

New Principal Place of Business:

241 39TH AVE NE
NAPLES, FL 34120

Current Mailing Address:

1800 51ST ST. S.W.
NAPLES, FL 34116

New Mailing Address:

241 39TH AVE NE
NAPLES, FL 34120

FEI Number: 59-3603074

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCAMISH, ANTHONY
1800 51ST ST. S.W.
NAPLES, FL 34116

Name and Address of New Registered Agent:

MCCAMISH, TIMOTHY
241 39TH AVE NE
NAPLES, FL 34120

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: TIMOTHY MCCAMISH

04/01/2002

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCCAMISH, TIMOTHY
Address: 1800 51ST ST. S.W.
City-St-Zip: NAPLES, FL 34116

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY MCCAMISH

D

04/01/2002

Electronic Signature of Signing Officer or Director

Date