

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 29, 2002 8:00 am
Secretary of State

01-29-2002 90044 007 ***150.00

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DOCUMENT # P99000109476

1. Entity Name

LAW OFFICES OF WILLIAM W. CORRY, P.A.

Principal Place of Business

**318 N. MONROE ST.
 TALLAHASSEE FL 32301**

Mailing Address

**318 N. MONROE ST.
 TALLAHASSEE FL 32301**

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

59-3615510

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

**CORRY, WILLIAM W
 318 N. MONROE ST.
 TALLAHASSEE FL 32301**

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 \$150.00
 After May 1, 2002 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 **D** ☐ Delete
 NAME **CORRY, WILLIAM W**
 STREET ADDRESS **318 N. MONROE ST.**
 CITY-ST-ZIP **TALLAHASSEE FL 32301**

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

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 (9/01)

Attachment
Doc # 199000109176

LAW OFFICES OF
WILLIAM W. CORRY, P.A.

301144

TRIAL PRACTICE - PERSONAL
INJURY AND WRONGFUL DEATH
TRIAL PRACTICE - GENERAL
CRIMINAL LAW

January 15, 2002

TELEPHONE (850) 222-3730
FACSIMILE (850) 224-6422
EMAIL: wwc@corrylaw.com

STAFF:
KATHY ROSSMAN, LEGAL ASSISTANT
JENA HERRING, ASSISTANT
STEPHANIE USINA, LAW CLERK
NANCEY BOATWRIGHT, BOOKKEEPER
(NOT MEMBERS OF THE FLA. BAR)

318 N. MONROE STREET (32301)
REPLY TO: P.O. BOX 527
TALLAHASSEE, FL 32302

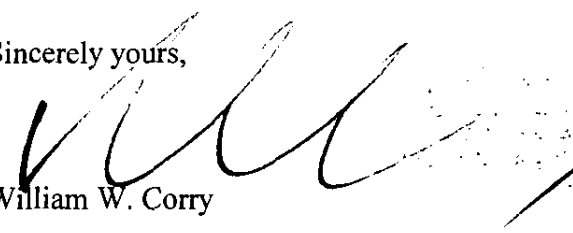
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: 2002 Uniform Business Report

Dear Sir or Madam:

Enclosed is my completed 2002 Uniform Business Report along with my check in the amount of \$150.00 representing the filing fee. Thanks.

Sincerely yours,


William W. Corry

WWC/kdr
enclosure