

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0099276 AV

**DOCUMENT # S37763**

1. Entity Name  
**NANCY MARKOE GALLERY, INC.**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
03 JUL 24 AM 10:42

Principal Place of Business  
**3112 PASS-A-GRILLE WAY  
ST. PETE BEACH FL 33706**

Mailing Address  
**3112 PASS-A-GRILLE WAY  
ST. PETE BEACH FL 33706**



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
City & State

Zip  
Country

Zip  
Country

4. FEI Number **59-3062509**  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**MARKOE, NANCY  
3112 PASS-A-GRILLE WAY  
ST. PETE BEACH FL 33706**

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PT MARKOE, NANCY 3112 PASS-A-GRILLE WAY ST. PETE BEACH FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>600022165826 08/08/03--01038--004 **150.00</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VS JO CAROL PETERS 3112 PASS A GRILLE WAY ST. PETE BCH FL</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AVAT RUDOLPH SWOBODA 8338 36TH AVENUE N SAINT PETERSBURG FL 33710</b> <input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** **SIGNATURE REQUIRED** **7/3/03** **360 0729**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

*Debra Chmit*

# 537763



## NANCY MARKOE GALLERY

FINE AMERICAN CRAFTS

3112 Pass-a-Grille Way, St. Pete Beach, FL 33706

(727) 360-0729 • FAX (727) 360-8750

nancymarkoegallery@earthlink.net

July 3, 2003

DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
P O BOX 1500  
TALLAHASSEE, FLORIDA 32302

Dear Florida Department of State:

We apologize for the late filing of the report and the remittance of \$150.

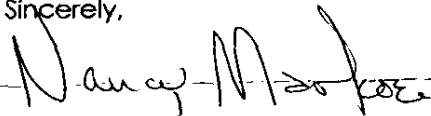
If you review our payment history, you will note that in 10 years, we have never been late.

Therefore, we would very much appreciate an acceptance of this \$150. payment, rather than \$550.

Unfortunately, my assistance passed away several months ago. I thought this had been handled, per usual, when it was received. Now I don't know whether the original was never received or it was lost in the turmoil of ~~getting~~ reorganizing her responsibilities.

I very much appreciate your understanding and consideration

Sincerely,



Nancy Markoe  
Nancy Markoe Gallery, Inc.