

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 01, 2002 8:00 am
Secretary of State

07-01-2002 90351 024 ***150.00

DOCUMENT # 546499
1. Entity Name SKEEGAN & ASSOCIATES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>8400 N. UNIVERSITY DR.</u>		3. Mailing Address <u>8400 N. UNIVERSITY DR.</u>	
Suite, Apt. #, etc. <u>STE 302</u>		Suite, Apt. #, etc. <u>STE 302</u>	
City & State <u>TAMARAC FL</u>		City & State <u>TAMARAC FL</u>	
Zip <u>33321</u>	Country	Zip <u>33321</u>	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>65-0255745</u>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name <u>CORT A. NEIMARK</u>
Street Address (P.O. Box Number is Not Acceptable) <u>840 CORPORATE DR.</u>
<u>SUITE 420</u>
City <u>FULT LAUDERDALE</u>
FL Zip Code <u>33334</u>

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) ☐

January 1 - May 1: Fee is \$150.00
After May 1: Fee is \$550.00
Amended UBR is \$61.25
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	<u>SKEEGAN, WILLIAM</u> <u>8400 N UNIVERSITY DR</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>SKEEGAN, JOAN R</u> <u>8400 N UNIVERSITY DR.</u> <u>TAMARAC, FL</u>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRCS/DGMT

6-25-02
Date

954.722-2151
Daytime Phone #

CR2E034B (12/01)

Skeegan and Associates
EXECUTIVE CONSULTANTS

Attachment

546499

118725

JUNE 28, 2002

TO WHOM IT MAY CONCERN

ENCLOSED IS 2002 UNIFORM BUSINESS REPORT
ALONG WITH CHECK FOR \$150.

WE NEVER RECEIVED THE REPORT THROUGH THE
MAIL AND WHEN I CALLED I WAS TOLD TO DOWNLOAD FORM
FROM WWW.JUNBIZ.ORG AND SEND WITH THIS LETTER
AND CHECK FOR \$150.

THANK YOU FOR YOUR CONSIDERATION.

SINCERELY



WILLIAM SKEEGAN, PRES.

SKEEGAN & ASSOC.