

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S58039

1. Entity Name
LAW OFFICES OF RAY WINDSOR, P.A.

Principal Place of Business

240 TORCHWOOD AVE
PLANTATION FL 33324
US

Mailing Address

240 TORCHWOOD AVE
PLANTATION FL 33324
US

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

65-0268337

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

FILINGS INC.
3732 N.W. 16TH ST.
FORT LAUDERDALE FL 33311

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 \$550.00
After September 12, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WINDSOR, RAY
240 TORCHWOOD AVE
PLANTATION FL 33324

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
600004560456-2
-08/28/01--01082--020
****150.00 ****150.00

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
01 AUG 22 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E034 (5/01)

LAW OFFICES OF
RAY WINDSOR P.A.

240 TORCHWOOD AVE.
PLANTATION, FLORIDA
33324

fg 2/27

TELEPHONE (954) 260-4777

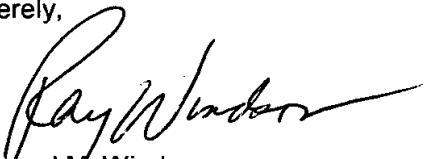
August 17, 2001

Division of Corporations

The purpose of this letter is firstly to apologize for failing to timely file my annual report and fee. For the past several years I have not practiced law and thus the corporation had no active employees or earned any income. I was in fact an employee of an MRI company, Central Magnetic Imaging of Plantation, Florida. Due to several medical emergencies including my son having a spinal fusion I simply through inadvertence failed to timely file. I am presently unemployed and would request at this time that you please consider waiving the late fee of \$400.00 as it presents quite a financial hardship to me. I have enclosed the \$150.00 normal fee.

Your consideration would be greatly appreciated

Sincerely,



Raymond M. Windsor