

2001 UNIFORM BUSINESS REPORT (UBR)

0417538

DOCUMENT # S87561

1. Entity Name

ALLEN S. BROWN P.A.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAR 16 PM 2:39

Principal Place of Business

% ALLEN S. BROWN
333 WEST VENICE AVE
VENICE FL 34285-2004
US

Mailing Address

% ALLEN S. BROWN
333 WEST VENICE AVE
VENICE FL 34285-2004
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 59-3086250

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BROWN, ALLEN S.
333 WEST VENICE AVE
VENICE FL 34285

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.

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, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DPV
BROWN, ALLEN S
333 W VENICE AVE
VENICE FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

2-27-01

Date

941-485-1154

Daytime Phone #

CR2E034 (10/00)

ALLEN S. BROWN P.A.

Attorney At Law

333 West Venice Avenue
Venice, Florida 34285

Telephone
(941)-485-1154
FAX
(941)-484-9864

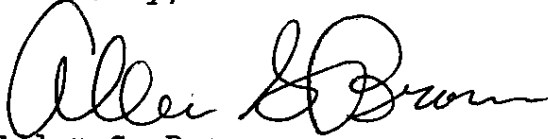
February 27, 2001

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

RE: Filing Fee for 2001 Uniform Business Report

Please pay the 2001 Uniform Business Report filing fee of \$150.00 from my closed electronic filing account # 07666103372 which has a balance of \$221.25 in it. Should there be any questions or problems with using the funds in the electronic filing account, please call me immediately.

Sincerely,



Allen S. Brown
Attorney At Law

enc. 2001 UBR

VS