

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 25, 2001 8:00 am
Secretary of State

06-25-2001 90041 022 ***150.00

DOCUMENT # S91465

1. Entity Name

CHASON ASSOCIATES, INC.

Principal Place of Business

**2350 PALM LAKE DRIVE
MERRITT ISLAND FL 32952**

Mailing Address

**2350 PALM LAKE DRIVE
MERRITT ISLAND FL 32952**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3091934

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CHASON, CAROLYN C
2350 PALM LAKE DRIVE
MERRITT ISLAND FL 32952**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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	CTS CHASON, CAROLYN C 2350 PALM LAKE DRIVE MERRITT ISLAND FL 32952 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHASON, DEREK A 2350 PALM LAKE DR MERRITT ISLAND FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M VOEHL, FRANIC W 280 LAKE DRIVE COCONUT CREEK FL 33063 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> 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:

Carolyn C. Chason
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/1/01 321-454-3839

CR2E034 (10/00)

Attachment
DH 891465
A0074629



Carolyn Chason

To: Carolyn Chason

cc:

06/20/2001 11:31 AM

Subject: 6/20 request for late fee waiver for filing the 2001 Uniform Business Report

To whom it concerns:

Re: Account 59-3091934, request for late fee waiver due to family battle with cancer

I'm writing to request a waiver of the late fee normally associated with late filing of the uniform business report. In years past I have filed this early and timely, however this year a family medical emergency called me out of state and resulted in several late filings and payments, this being one of them.

This spring my mother was diagnosed with AML - Acute Myeloid Leukemia - and I had to travel to North Carolina to care for her through her chemo therapies and blood transfusions between March and May.

This month I've been trying to catch up on business filing and found this report and check that were due May 1st. The check is dated for 4/1/01, so I intended to send it earlier, but my assistant must have overlooked it during leave of absence to care for my mother in North Carolina.

Thanks in advance for your consideration. Regards,

Carolyn Chason, CEO
carolyn@chason.com
<http://www.chason.com>
321-454-3839 voice mail
321-258-8981 cell phone