

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S99713**

1. Entity Name

MICHAEL J. BURLEY P.A.**FILED**
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90049 001 ***150.00

Principal Place of Business

**612 NORTH ORANGE AVENUE
STE A-12
JUPITER FL 33458
US**

Mailing Address

**612 NORTH ORANGE AVENUE
STE A-12
JUPITER FL 33458
US**

2. Principal Place of Business

612 North Orange Avenue

Suite, Apt. #, etc.

Suite C-3

City & State

Jupiter, Florida 33458

Zip

33458

Country

U.S.A.

3. Mailing Address

612 North Orange Avenue

Suite, Apt. #, etc.

Suite C-3

City & State

Jupiter, Florida 33458

Zip

33458

Country

U.S.A.

6. Name and Address of Current Registered Agent

**BURLEY, MICHAEL J.
612 NORTH ORANGE AVENUE
STE A-12
JUPITER FL 33458**

7. Name and Address of New Registered Agent

Name

Burley, Michael J.

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

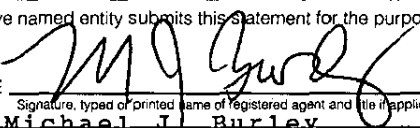
612 North Orange Avenue, Suite C-3

City

Jupiter**FL**Zip Code
33458

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


Michael J. Burley

(NOTE: Registered Agent signature required when reinstating)

03/22/01

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	D	<input type="checkbox"/> Delete
NAME	BURLEY, MICHAEL J.	
STREET ADDRESS	612 N ORANGE AVENUE STE A-12	
CITY-ST-ZIP	JUPITER FL 33458	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Burley, Michael J.	
STREET ADDRESS	612 North Orange Avenue, Suite C-3	
CITY-ST-ZIP	Jupiter, Florida 33458	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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
Michael J. Burley

03/22/01

(561) 744-3100

Date

Daytime Phone #

CR2E034 (10/00)