

2002 UNIFORM BUSINESS REPORT (UBR)

0003947 AV

DOCUMENT # V00668

1. Entity Name
HALL EFFECT SERVICES, INC.

FILED

02 JUL 30 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
3122-3 LEON RD
JACKSONVILLE FL 32216

Mailing Address
3122-3 LEON RD
JACKSONVILLE FL 32216

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3108958

Applied For
Not Applicable

Zip

Country

Zip

Country

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

HALL, DAVID F.
3122-3 LEON RD
JACKSONVILLE FL 32216

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. I am familiar with, and accept the obligations of registered agent.

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 13, 2002 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

PVS
HALL, DAVID F.
3122-3 LEON RD
JACKSONVILLE FL 32216

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

000006918320--0
-08/06/02--01051--020
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

T
HALL, DAVID F.
3122-3 LEON RD
JACKSONVILLE FL 32216

☐ 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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment V001d68

**HALL EFFECT SERVICES, INC.
3122-3 LEON ROAD
JACKSONVILLE, FLORIDA 32246**

July 16, 2002

*Division of Corporations
Annual Report /Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327*

Dear Sir or Madam;

Enclosed please find the second notice on my corporation annual report. I mailed my original report in on March 18, 2002, along with a check for \$150.00. My check has never cleared my bank. I filed my report for 2001 last year and it took several months before my check cleared so I assumed the same thing happened this year. I called your office and the women there told me to send in this report along with this letter and another check for \$150.00 and you would accept this second attempt as complying with the timely filing of my annual report. I hope she was correct.

Thank you in advance for your cooperation.

Sincerely



*David F. Hall
President*