

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 02, 2002 8:00 am
Secretary of State

07-02-2002 90813 032 ***150.00

0456127 AV

DOCUMENT # V01850

1. Entity Name

TOM RICHARDS, INC.

Principal Place of Business

**28059 US HWY 19 NORTH
 SUITE 100
 CLEARWATER FL 33761**

Mailing Address

**28059 US HWY 19 NORTH
 SUITE 100
 CLEARWATER FL 33761**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number

34-1257334

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**BURKE, ROBERT C JR
 28059 U.S. HWY 19 NORTH, SUITE 100
 CLEARWATER FL 33761**

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **VPS**
 NAME **RICHARDS, TOM**
 STREET ADDRESS **38750 US HWY 19 N, UNIT #2056-58**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

☐ Delete

TITLE **T**
 NAME **RICHARDS, SUSAN**
 STREET ADDRESS **38750 US HWY 19 N, UNIT #2056-58**
 CITY-ST-ZIP **PALM HARBOR FL 34684**

☐ Delete

TITLE **PCEO**
 NAME **STEWART, MICHAEL J**
 STREET ADDRESS **7010 LINDSEY DRIVE**
 CITY-ST-ZIP **MENTOR OH 44060**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

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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

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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:

[Handwritten Signature]

2/18/2002 440-944-0500



Attachment
R# V01850
B0126709

DEAR POSTAL CUSTOMER:

The enclosed was discovered loose in the mails and forwarded to this office for disposition.

Often, items that were not intended for the mails inadvertently get deposited, and in the course of mail processing, items occasionally become separated from the original envelope or wrapping.

Please accept our sincere apology for any inconvenience this may have caused, as it is our sincere desire to provide service to you, our valued customer.

CONSUMER AFFAIRS/CLAIMS
LOOSE IN MAILS
2400 ORANGE AVENUE RM 25
CLEVELAND OHIO 44101-9652

**PROCESS
TECHNOLOGY**

Attachment
104-V018-20
B0126769

LESLIE THOMAS
Controller

June 27, 2002

Florida Department of State
Annual Reports Section
P.O. Box 1500
Tallahassee, FL 32302-1500

Please accept this letter, our payment, and a copy of the Uniform Business Report originally mailed to you on Friday April 12, 2002.

We were just notified by the US Postal Service that the original check was found loose in the mail. We have not recovered the original UBR report, which is why I am sending a copy. I have also enclosed a copy of the letter from the US Postal Service.

We apologize for the delay in the remittance of this report and payment, and hope that you will consider waiving any late fee or penalty due to the unusual circumstances surrounding the lost mail. If you have any questions or need any additional information please do not hesitate to contact me. I thank you for your consideration of this matter.

Sincerely,

Leslie N. Thomas
Leslie N. Thomas