

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V37975

1. Entity Name

AERIAL & ARCHITECTURAL PHOTO, INC.

FILED
Sep 12, 2000 8:00 am
Secretary of State

09-12-2000 90240 047 ***150.00

Principal Place of Business

103 CENTURY 21 DR
 115
 JACKSONVILLE FL 32216
 US

Mailing Address

103 CENTURY 21 DR
 115
 JACKSONVILLE FL 32216
 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

59-3127602

Applied For

Not Applicable

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

JOHNSON, GORDON
 1650-2 BEACH AVE
 ATLANTIC BEACH FL 32233

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 \$550.00
After SEPTEMBER 13, 2000 Min. 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 PVSD ☐ Delete
 NAME JOHNSON, GORDON
 STREET ADDRESS 1650-2 BEACH AVE
 CITY-ST-ZIP ATLANTIC BEACH FL 32233

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ 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

9-7-00 (904) 725-6968

Date

Daytime Phone #

CR2E034 (5/00)

**AERIAL &
ARCHITECTURAL
PHOTO, INC.**



High Resolution Custom Aerial Photography
STOCK Aerial Photos & APICS™ Color Laser Copies

Attachment
✓ 37915

A0077050

103 Century 21 Drive, Suite #115
Jacksonville, FL 32216
(904) 725-6968
(904) 727-2090
Fax: (904) 725-9977

September 7, 2000

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

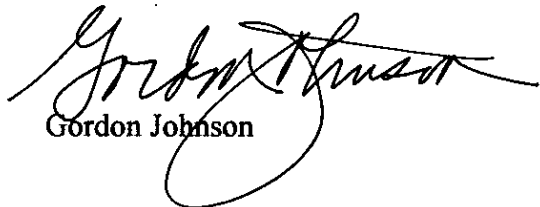
Dear Sirs:

Enclosed is my 2000 Uniform Business Report and a check in the amount of \$150.00 for the normal filing fee.

I respectfully request that the \$400.00 late filing fee be waived or reduced as the original (first notice) was not received.

I thank you for your help in this matter.

Sincerely,


Gordon Johnson