

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **V43742**

1. Entity Name

GARLINGTON COMPANY, ARCHITECTS, INC.

(R)

FILED
Aug 10, 2000 8:00 am
Secretary of State

08-10-2000 90004 042 ***150.00

Principal Place of Business

**4208 OXFORD AVENUE
JACKSONVILLE FL 32210**

Mailing Address

**4208 OXFORD AVENUE
JACKSONVILLE FL 32210**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3137152

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

**OBERDORFER, E. CHARLES
1719 BLANDING BOULEVARD
JACKSONVILLE FL 32210**

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 **D** ☐ Delete
NAME **GARLINGTON, CARL D.**
STREET ADDRESS **4208 OXFORD AVENUE**
CITY-ST-ZIP **JACKSONVILLE FL**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: CARL D. GARLINGTON **CARL D. GARLINGTON** 7-28-00 904-389-4035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (5/00)

GARLINGTON COMPANY, ARCHITECTS, INC.

MEMBER OF AMERICAN INSTITUTE OF ARCHITECTS

*Attachment
DOS # V43742
0007408*

July 28, 2000

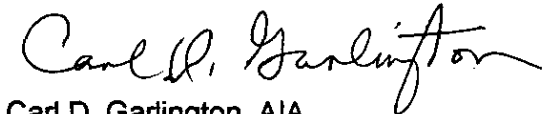
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Dear Sir or Madam:

I mailed in the First Notice Report about April 9, 2000, with a check for \$150.00. I understand from a telephone conversation with your Department that you received my report and check well ahead of the deadline, but that something was wrong with the check. I never heard anything from you about this.

The gentleman in your office said that I should complete the Second Notice Report, enclose a check for \$150.00 and ask for a waiver of the late fee, which I am requesting now.

Sincerely,



Carl D. Garlington, AIA