

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90050 037 ***150.00

DOCUMENT # V53541

1. Entity Name

MARY E. TONNER AND ASSOCIATES, INCORPORATED

Principal Place of Business

**3540 BAYOU CIRCLE
 LONGBOAT KEY FL 34228**

Mailing Address

**3540 BAYOU CIRCLE
 LONGBOAT KEY FL 34228**

2. Principal Place of Business

**8725 LAKESIDE BLVD
 Suite, Apt. #, etc. #303**

3. Mailing Address

**8725 LAKESIDE BLVD
 Suite, Apt. #, etc. #303**



DO NOT WRITE IN THIS SPACE

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

4. FEI Number

65-0347812

Applied For

Not Applicable

Zip

32963

Country

INDIAN RIVER

Zip

32963

Country

INDIAN RIVER

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**TONNER, MARY E.
 3540 BAYOU CIRCLE
 LONGBOAT KEY FL 34228**

*CHANGE
 OF
 ADDRESS
 ONLY*

7. Name and Address of New Registered Agent

Name

TONNER, MARY E.

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

8725 LAKESIDE BLVD

#303

City

VERO BEACH, FL FL

Zip Code

32963

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

MARY E. TONNER, PRESIDENT

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 \$150.00

After May 1, 2002 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 **DP** ☐ Delete
 NAME **TONNER, MARY E.**
 STREET ADDRESS **3540 BAYOU CIRCLE**
 CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE **D** ☐ Delete
 NAME **TONNER, GERALD W.**
 STREET ADDRESS **3540 BAYOU CIRCLE**
 CITY-ST-ZIP **LONGBOAT KEY FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME **address only**
 STREET ADDRESS **8725 LAKESIDE BLVD #303**
 CITY-ST-ZIP **VERO BEACH, FL 32963**

TITLE ☒ Change ☐ Addition
 NAME **address only**
 STREET ADDRESS **8725 LAKESIDE BLVD #303**
 CITY-ST-ZIP **VERO BEACH, FL 32963**

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

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

TITLE ☐ Change ☐ Addition
 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:

MARY E. TONNER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 561 492-0567
 Date Daytime Phone #

CR2E034 (9/01)