

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **V55886**

1. Entity Name

GEORGE J. BECKER JR. & ASSOCIATES, INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90310 015 ***150.00

A0062330

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

8250 AQUILA ST.

8250 AQUILA ST.

PORT RICHEY, FL 34668

PORT RICHEY, FL 34668

2. Principal Place of Business

8250 AQUILA ST.

3. Mailing Address

8250 AQUILA ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PORT RICHEY, FL

City & State

PORT RICHEY, FL

Zip

34668

Country

PASCO

Zip

34668

Country

PASCO

4. FEI Number

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

BYRD F. MARSHALL, JR.
301 E. PINE ST.
SUITE 1400
ORLANDO, FL 32801

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 \$150.00
After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
GEORGE J. BECKER JR. ☐ Delete
8250 AQUILA ST.
PORT RICHEY, FL 34668

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George J. Becker Jr

4-17-01

Date

Daytime Phone #

(828) 756-7908

CR2E034 (11/00)