

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2001 8:00 am
Secretary of State
 04-10-2001 90031 017 ***158.75

DOCUMENT # V55941

1. Entity Name
FLORIDA MANAGEMENT CONSULTANTS, P.A.

Principal Place of Business

P.O. BOX 3787
 VERO BEACH FL 32964

Mailing Address

P.O. BOX 3787
 VERO BEACH FL 32964

00033233



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

780 U.S. Hwy #1

Suite, Apt. #, etc.

Suite 201

City & State

VERO BEACH, FL

Zip

32962

Country

USA

3. Mailing Address

780 U.S. Hwy #1

Suite, Apt. #, etc.

Suite 201

City & State

VERO BEACH, FL

Zip

32962

Country

USA

4. FEI Number **65-0375881**

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

PERKINS, TED H
1021 INDIAN MOUND TRAIL
VERO BCH. FL 32963

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 ☐ Delete
 NAME **D PERKINS, SUSAN N**
 STREET ADDRESS **P.O. BOX 3787 N/A**
 CITY-ST-ZIP **VERO BEACH FL 32964**

TITLE ☒ Change ☐ Addition
 NAME **D PERKINS, SUSAN N.**
 STREET ADDRESS **780 U.S. Hwy #1, Suite 201**
 CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE ☐ Delete
 NAME **D PERKINS, TED H**
 STREET ADDRESS **P.O. BOX 3787 N/A**
 CITY-ST-ZIP **VERO BEACH FL 32964**

TITLE ☐ Change ☐ Addition
 NAME **D PERKINS, TED H**
 STREET ADDRESS **780 U.S. Hwy #1 Suite 201**
 CITY-ST-ZIP **VERO BEACH, FL 32962**

TITLE ☐ Delete
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 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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/01
 Date

561-564-8788
 Daytime Phone #

CR2E034 (10/00)