

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # V67624

1. Entity Name

MC GEE HOWLE AND ASSOCIATES ARCHITECTS, INC.

Principal Place of Business

2801 OCEAN DRIVE  
SUITE 302  
VERO BEACH FL 32963

Mailing Address

2801 OCEAN DRIVE  
SUITE 302  
VERO BEACH FL 32963

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 59-0868750

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fees Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOWLE, HARRY G JR  
2801 OCEAN DRIVE  
SUITE 302  
VERO BEACH 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MC GEE, H GLENN  
2801 OCEAN DRIVE  
VERO BEACH FL

☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HOWLE, HARRY G JR  
2801 OCEAN DRIVE  
VERO BEACH FL

☐ Delete

TITLE  
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CITY-ST-ZIP  
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☐ 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 person 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:

HARRY G. HOWLE, JR

1-26-01 561-231-4222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0086039

CR2E034 (10/00)

FILED  
Feb 05, 2001 8:00 am  
Secretary of State

02-05-2001 90041 044 \*\*\*158.75

914131



DO NOT WRITE IN THIS SPACE