

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # **V72254**

1. Entity Name

Mary Wilkins Group Home, Inc.

FILED
02 DEC 19 AM 9:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

455 Restwood Ave.
Suite, Apt. #, etc.

3. Mailing Address

455 Restwood Ave.
Suite, Apt. #, etc.

Bartow, FL. 33830
City & State

Bartow, FL. 33830
City & State

DO NOT WRITE IN THIS SPACE

01-02

Zip

Country

Zip

Country

4. FEI Number

59-3158744

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Mary L. Wilkins

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

455 Restwood Ave.

Bartow,
City

FL

Zip Code

33830

**DO NOT WRITE
IN THIS SPACE**

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 A Walker

MARY A. WALKER

11-24-02

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) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 NAME STREET ADDRESS CITY-ST-ZIP	<i>PD</i> <i>Mary L. Wilkins'</i> <i>455 Restwood Ave.</i> <i>Bartow, FL. 33830</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VD</i> <i>Martha Walker</i> <i>455 Restwood Ave.</i> <i>Bartow, FL. 33830</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>STO</i> <i>Mary A. Walker</i> <i>455 Restwood Ave.</i> <i>Bartow, FL. 33830</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	400009247264 <i>11/27/02--01401--011 **150.00</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	400009247264 <i>12/19/02--01031--002 **150.00</i>
TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary A Walker* **MARY A. WALKER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-24-02 **663-533-5500**

Date

Daytime Phone #

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Mary Wilkins Group Home, Inc.
455 Restwood Ave.
Bartow, Fl. 33830

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

Dear Sir:

Enclosed is the Uniform Business Report form and a check for \$150.00 for what I hope will reinstate this corporation.

I did not receive this form to send in to renew it until I just found out that it has been inactive.

I hope this will get it active again and I will make sure I find out about this before it is to late.

If there is any thing else I need to send please let me know.

Thanks

Mary A Walker

Mary A. Walker, Sec.
Mary Wilkins Group Home, Inc.