

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2000 8:00 am
Secretary of State

04-06-2000 90058 005 ***150.00

DOCUMENT # 600277

1. Entity Name

RICHMAN GREER WEIL BRUMBAUGH MIRABITO AND CHRIST

Principal Place of Business

Mailing Address

**MIAMI CENTER
 201 S. BISCAYNE BLVD., 10 FLOOR
 MIAMI FL 33131
 US**

**MIAMI CENTER
 201 S. BISCAYNE BLVD., 10 FLOOR
 MIAMI FL 33131-4325
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1172536

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICHMAN, GERALD F
 MIAMI CENTER
 201 SOUTH BISCAYNE BLVD., 10 FLOOR
 MIAMI FL 33131**

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, 2000 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	PD	<input type="checkbox"/> Delete
NAME	RICHMAN, GERALD F.	
STREET ADDRESS	MIAMI CENTER, 201 S. BISCAYNE BLVD., 10 FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	<input type="checkbox"/> Delete
NAME	WEIL, KENNETH J	
STREET ADDRESS	MAIMI CENTER, 201 S. BISCAYNE BLVD, 10 FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	SDVP	<input type="checkbox"/> Delete
NAME	BRUMBAUGH, JOHN M.	
STREET ADDRESS	MIAMI CENTER, 201 S. BISCAYNE BLVD., 10 FL	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	<input type="checkbox"/> Delete
NAME	GREER, ALAN G	
STREET ADDRESS	MIAMI CENTER, 201 S. BISCAYNE BLVD, 10 FLO	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John M. Brumbaugh Sec

1/3/28/00

Date

305-373-4000

Daytime Phone #

CF - 04.1999