

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90168 044 ***150.00

DOCUMENT # 602316

1. Entity Name
ALLEN, DYER, DOPPELT, MILBRATH & GILCHRIST, P.A.

Principal Place of Business 255 SOUTH ORANGE AVENUE SUITE 1401 ORLANDO FL 32802 US	Mailing Address P.O. BOX 3791 ORLANDO FL 32802-3791
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number 59-1298851	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip	Country	Zip	Country		

6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
ALLEN, HERBERT L 255 SOUTH ORANGE AVE., SUITE 1401 ORLANDO FL 32802			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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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	VP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	REGAN, CHRISTOPHER F		NAME		
STREET ADDRESS	255 S ORANGE AVENUE, STE 1401		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		CITY - ST - ZIP		
TITLE	STD <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHITTLE, JEFFREY S		NAME		
STREET ADDRESS	255 SOUTH ORANGE AVE., SUITE 1401		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		CITY - ST - ZIP		
TITLE	VP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SIGALOW, DAVID L		NAME		
STREET ADDRESS	255 SOUTH ORANGE AVE., SUITE 1401		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		CITY - ST - ZIP		
TITLE	VP <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DYER, ROBERT		NAME		
STREET ADDRESS	255 SOUTH ORANGE AVE., SUITE 1401		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		CITY - ST - ZIP		
TITLE	PD <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GILCHRIST, BRIAN R.		NAME		
STREET ADDRESS	255 SOUTH ORANGE AVE., SUITE 1401		STREET ADDRESS		
CITY - ST - ZIP	ORLANDO FL		CITY - ST - ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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: **BRIAN GILCHRIST** 4/14/00 407-841-2300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)