

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 758352

1. Entity Name  
SIX THOUSAND ASSOCIATION, INC.



**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90279 040 \*\*\*\*61.25

Principal Place of Business  
2180 W SR 434  
STE 5000  
LONGWOOD FL 32779  
US

Mailing Address  
2180 W SR 434  
STE 5000  
LONGWOOD FL 32779  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2112696

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fees Required

6. Name and Address of Current Registered Agent

HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434, SUITE 5000  
LONGWOOD FL 32779

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	MCLEAR, WILLIAM DR.	6000 SAN JOSE BLVD., #3	JACKSONVILLE FL 32217	<input type="checkbox"/>
VD	KLIMAN, HY	6000 SAN JOSE BLVD., 5A	JACKSONVILLE FL 32217	<input type="checkbox"/>
SD	RODEN, ANTHONY	6000 SAN JOSE BLVD # 9F	JACKSONVILLE FL 32217	<input type="checkbox"/>
TD	HOFFENBERG, BEN	6000 SAN JOSE BLVD. #4F	JACKSONVILLE FL 32217	<input type="checkbox"/>
D	RUSH, JOHN DR	6000 SAN JOSE BLVD # 1A	JACKSONVILLE FL 32217	<input type="checkbox"/>
D	KASTICK, MICHAEL	6000 SAN JOSE BLVD #1F	JACKSONVILLE FL 32217	<input checked="" type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
SUE RUST D	6000 SAN JOSE BLVD # 11B	JACKSONVILLE, FL 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
D	ROGER PALMER	6000 SAN JOSE BLVD. # 11E	JACKSONVILLE, FL 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	LEWIS LIBBY	6000 SAN JOSE BLVD. # 1B	JACKSONVILLE, FL 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	ELI BECKER	6000 SAN JOSE BLVD. # 11A	JACKSONVILLE, FL 32217	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEN M. HOFFENBERG, TREAS 4/12/03 904/133-8939  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #