

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90048 012 ***150.00

DOCUMENT # K19000

1. Entity Name

STILES CORPORATION

Principal Place of Business

**6400 N. ANDREWS AVE.
 FORT LAUDERDALE FL 33309**

Mailing Address

**6400 N. ANDREWS AVE.
 FORT LAUDERDALE FL 33309**

2. Principal Place of Business

300 SE 2nd St.

Suite, Apt. #, etc.

3. Mailing Address

300 SE 2nd St.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

Zip **33301**

Country

City & State

Ft. Lauderdale, FL

Zip **33301**

Country

4. FEI Number

65-0036314

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75

Additional Fee Required

6. Name and Address of Current Registered Agent

**DUKE, BRYAN W.
 C/O STILES CORPORATION
 6400 N ANDREWS AVE
 FT LAUDERDALE FL 33309**

7. Name and Address of New Registered Agent

Name

Patricia Jones

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

c/o Stiles Corp.

300 SE 2nd St.

City

Ft. Lauderdale,

FL

Zip Code **33301**

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

TITLE	CD	<input type="checkbox"/> Delete
NAME	STILES, TERRY W.	
STREET ADDRESS	6400 N ANDREWS AVE	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	
TITLE	PT	<input type="checkbox"/> Delete
NAME	EAGON, DOUGLAS P	
STREET ADDRESS	6400 N. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE	VP	<input type="checkbox"/> Delete
NAME	PALMER, STEPHEN R	
STREET ADDRESS	6400 N. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE	VS	<input type="checkbox"/> Delete
NAME	JONES, PATRICIA J	
STREET ADDRESS	6400 N. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	SHERIDAN, BARBARA	
STREET ADDRESS	6400 N. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	DUKE, BRYAN W	
STREET ADDRESS	6400 N. ANDREWS AVE.	
CITY-ST-ZIP	FORT LAUDERDALE FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STILES, TERRY W.	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
TITLE	PT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EAGON, DOUGLAS P.	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMER, STEPHEN R.	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
TITLE	VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, PATRICIA	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHERIDAN BARBARA	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	FERRERA, ROCCO	
STREET ADDRESS	300 SE 2nd St.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33301	

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

Date

Daytime Phone #

CR2E034 (10/00)

Attachment

UNIFORM BUSINESS REPORT

835388

K 19000

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: V Addition
NAME: O'SHEA, DENNIS F.
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: MOORE, O. TIMOTHY
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: KATES, THOMAS
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: BAISDEN, VICKI
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: PEAL, JEFFREY
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: ESPOSITO, ROBERT
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: COUNTRYMAN, JANET
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V Addition
NAME: SPAUGH, LYNN
STREET ADDRESS: 300 SE 2nd St.

TITLE: V Addition
NAME: BRESLAU, ROBERT
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

12. Continued

Attachment

835388

K19000
Addition

TITLE: V
NAME: JANSSEN, JOSEPH
STREET ADDRESS: 300 SE 2nd St.
CITY-ST-ZIP: Ft. Lauderdale, FL 33301

TITLE: V
NAME: HENSLER, RAYMOND
STREET ADDRESS: 2 International Plaza Drive, Suite 103
CITY-ST-ZIP: Nashville, TN 37217

Addition

TITLE: V
NAME: WILLIAM, JEFF
STREET ADDRESS: 33 Mansell Court, Suite 100
CITY-ST-ZIP: Roswell, GA 30076

Addition