

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K19469

1. Entity Name  
SMITH, HOOD, PERKINS, LOUCKS, STOUT & ORFINGER, P.A.

**FILED**

00 MAY 24 AM 10:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
c/o William E. Loucks c/o William E. Loucks  
444 Seabreeze Blvd. P.O. Box 15200  
Suite 900 Daytona Beach, FL 32115-5200  
Daytona Beach, FL 32118

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country  
3. Mailing Address Suite, Apt. #, etc. City & State Zip Country

DO NOT WRITE IN THIS SPACE  
5/5/00 90082 029 \$150.00

4. FEI Number 59-2880513 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
Loucks, William E.  
444 Seabreeze Blvd., Suite 900  
Daytona Beach, FL 32118

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.

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

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"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Delete
NAME	DV Selis, Scott A.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Orfinger, Michael S.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118
TITLE	DV <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Perkins, Terence R.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118
TITLE	DV <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stout, Larry R.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118
TITLE	DVS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Loucks, William E.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118
TITLE	DV <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Smith, Horace Jr.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118
TITLE	DP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hood, Charles D. Jr.
STREET ADDRESS	444 Seabreeze Blvd., Suite 900
CITY-ST-ZIP	Daytona Beach, FL 32118

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:  Michael S. Orfinger 4/25/00 904-254-6875  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice President Date Daytime Phone #

CR2E034 (9/99)

**KE**