

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90207 013 ***158.75

DOCUMENT # P02000070286

1. Entity Name
PAUL R. VE HORN, PA.



Principal Place of Business
**1536 13 ST NORTH
ST PETERSBURG FL 33704**

Mailing Address
**1536 13 ST NORTH
ST PETERSBURG FL 33704**



2. Principal Place of Business
1535 13TH ST. N.
Suite, Apt. #, etc.

3. Mailing Address
P.O. BOX 7188
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
ST. PETERSBURG, FL
Zip
33704 Country
USA

City & State
ST. PETERSBURG, FL
Zip
33734-7188 Country
USA

4. FEI Number
TIN #593670143

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**VEHORN, PAUL R
1536 13 ST NORTH
ST PETERSBURG FL 33704**

7. Name and Address of New Registered Agent

Name
PAUL R. VEHORN
Street Address (P.O. Box Number is Not Acceptable)
1535 13TH ST. N.
City
ST. PETERSBURG FL Zip Code
33704

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 \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VEHORN, PAUL R 1536 13 ST NORTH ST PETERSBURG FL 33704	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VEHORN, PAUL R. 1535 13TH ST. N. ST. PETERSBURG, FL 33704	☒ Change ☐ Addition ADDRESS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 607, 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 title empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/03 (727) 823-3367
Date Daytime Phone #

CR2E034 (10/02)