

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000011836

1. Entity Name

CYNTHIA B. GLAZIER, P.A.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90127 012 ***150.00

Principal Place of Business

Mailing Address

2301 PARK AVE.
SUITE 210
ORANGE PARK FL 32073
US

2301 PARK AVE.
SUITE 210
ORANGE PARK FL 32073-5558
US

2. Principal Place of Business

8761 Perimeter Park Blvd

3. Mailing Address

8761 Perimeter Park Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 103

Suite 103

City & State

Jacksonville FL

City & State

Jacksonville FL

Zip

32216

Country

Duval

Zip

32216

Country

Duval



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3297854

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRANT, MOORE M & WELLS
50 N LAURA ST, 3100
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent

Name

Scott L. Glazier, Esq.

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

8761 Perimeter Park Blvd

Suite 103

City

Jacksonville

FL

Zip Code

32216

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

Scott L. Glazier

Scott L. Glazier

3/29/2000

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 D ☐ Delete
NAME GLAZIER, CYNTHIA B
STREET ADDRESS 8069 WOODGROVE RD.
CITY-ST-ZIP JACKSONVILLE FL

TITLE S ☐ Delete
NAME GLAZIER, SCOTT L
STREET ADDRESS 8069 WOODGROVE RD
CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D/P ☒ Change ☐ Addition
NAME Glazier, Cynthia B.
STREET ADDRESS 8761 Perimeter Park Blvd, Suite 103
CITY-ST-ZIP Jax FL 32216

TITLE D/P/S ☒ Change ☐ Addition
NAME Glazier, Scott L.
STREET ADDRESS 8761 Perimeter Park Blvd, Suite 103
CITY-ST-ZIP Jax FL 32216

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Scott L. Glazier VP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/2000

Date

(904) 997-1033

Daytime Phone #

CR2E034 (9/99)