

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2000 8:00 am
Secretary of State

03-13-2000 90066 035 ***150.00

DOCUMENT # P96000020614

1. Entity Name

HAMRICK, PERREY, QUINLAN & SMITH, P.A.

Principal Place of Business

Mailing Address

1401 MANATEE AVENUE, W.
 SUITE 920
 BRADENTON FL 34205

1401 MANATEE AVENUE, W.
 SUITE 920
 BRADENTON FL 34205-6748

2. Principal Place of Business

601 12th Street West

3. Mailing Address

601 12th Street West

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
 Bradenton, FL

City & State
 Bradenton, FL

4. FEI Number **65-0648670**

Applied For
 Not Applicable

Zip
 34205

Country
 Manatee

Zip
 34205

Country
 Manatee

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, GILBERT A JR.
1401 MANATEE AVENUE, W.
SUITE 920
BRADENTON FL 34205

Name
 Street Address (P.O. Box Number is Not Acceptable)
601 12th Street West
 City **Bradenton, FL** Zip Code **34205**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, GILBERT A JR. 1401 MANATEE AVENUE, W., SUITE 920 BRADENTON FL 34205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 601 12th Street West Bradenton, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUINLAN, JOHN V 1401 MANATEE AVENUE, W., SUITE 920 BRADENTON FL 34205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 601 12th Street West Bradenton, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMRICK, MICHAEL M 1401 MANATEE AVE W, STE. 920 BRADENTON FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 601 12th Street West Bradenton, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERREY, PHILIP E 1401 MANATEE AVE W, STE. 920 BRADENTON FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 601 12th Street West Bradenton, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEWHALL, TIMOTHY L 1401 MANATEE AVENUE, W., SUITE 920 BRADENTON FL 34205 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 601 12th Street West Bradenton, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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

3/6/00
 Date

Daytime Phone # _____

CR2E034 (9/99)