2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2002 8:00 am
Secretary of State
02-20-2002 90159 021 ***150.00

DOCUMENT # P96000102763

Entity Name
NDERSON, CULLITON & SULLIVAN, P.A.

rincipal Place of Business	Mailing Address
984 WELLINGTON CIRCLE W. ALLAHASSEE FL 32308	2984 WELLINGTON CIRCLE W. TALLAHASSEE FL 32308

DO NOT WRITE IN THIS SPACE

Principal Place of Business	3. Mailing Address
1584 METROPOLITAN BLVD.	1584 METROPOLITAN BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
TALLAHASSEE, FL. 32308	TALLAHASSEE, FL. 32308
City & State	City & State
Zip 32308 / Country USA	Zip 32308 / Country USA

4. FEI Number 59-3414602 ☐ Applied For ☐ Not Applicable

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
ANDERSON, PAUL M 2984 WELLINGTON CIRCLE WEST TALLAHASSEE FL 32308	Name ANDERSON PAUL M. Street Address (P.O. Box Number is Not Acceptable) 1584 METROPOLITAN BLVD. TALLAHASSEE City FL Zip Code 32308

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.

IGNATURE Paul M. Anderson 1/9/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

. 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, 2002 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

1. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TLE ME REET ADDRESS TY-ST-ZIP	P ANDERSON, PAUL M 2984 WELLINGTON CIRCLE W TALLAHASSEE FL 32308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 1584 METROPOLITAN BLVD TALLAHASSEE FL 32308
TLE ME REET ADDRESS TY-ST-ZIP	VP CULLITON, SEAN P 2984 WELLINGTON CIRCLE W. TALLAHASSEE FL 32308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 1584 METROPOLITAN BLVD TALLAHASSEE FL. 32308
TLE ME REET ADDRESS TY-ST-ZIP	ST SULLIVAN, DAVID G 2984 WELLINGTON CIRCLE W TALLAHASSEE FL 32308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 1584 METROPOLITAN BLVD. TALLAHASSEE FL. 32308
TLE ME REET ADDRESS TY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TLE ME REET ADDRESS TY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/01)

. 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.

IGNATURE: [signature] 1/14/02 (850) 894-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #