

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 521190

1. Entity Name

COLLINS, BROWN, CALDWELL, BARKETT & GARAVAGLIA,

Principal Place of Business

Mailing Address

756 BEACHLAND BOULEVARD  
P O BOX 3686  
VERO BEACH FL 32964

756 BEACHLAND BOULEVARD  
P O BOX 3686  
VERO BEACH FL 32964

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1795861

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

COLLINS JR., GEORGE G.  
756 BEACHLAND BOULEVARD  
VERO BEACH FL 32963

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, 2001 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

TITLE VPD ☐ Delete  
NAME COLLINS, GEORGE G. JR.  
STREET ADDRESS 756 BEACHLAND BOULEVARD  
CITY-ST-ZIP VERO BEACH FL

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

TITLE VPSD ☐ Delete  
NAME CALDWELL, WILLIAM W  
STREET ADDRESS 756 BEACHLAND BOULEVARD  
CITY-ST-ZIP VERO BEACH FL 32963

TITLE VP/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPTD ☐ Delete  
NAME BROWN, CALVIN B.  
STREET ADDRESS 756 BEACHLAND BOULEVARD  
CITY-ST-ZIP VERO BEACH FL

TITLE P/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☐ Delete  
NAME BARKETT, BRUCE D  
STREET ADDRESS 756 BEACHLAND BLVD  
CITY-ST-ZIP VERO BCH FL

TITLE S/T/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE PD ☐ Delete  
NAME GARVAGLIA, MICHAEL J  
STREET ADDRESS 756 BEACHLAND BLVD.  
CITY-ST-ZIP VERO BEACH FL

TITLE VP/D ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/01

Date

(561) 231-4343

Daytime Phone #

CALVIN B. BROWN

CR2E034 (10/00)

0086662

FILED  
Jan 16, 2001 8:00 am  
Secretary of State

01-16-2001 90051 016 \*\*\*150.00

C0004085



DO NOT WRITE IN THIS SPACE