

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90009 039 ***150.00

DOCUMENT # P99000072959

1. Entity Name

BROUGHTON PRODUCTIONS, INC.

Principal Place of Business

**3900 NINTH STREET NORTH
 ST. PETERSBURG FL 33703**

Mailing Address

**3900 NINTH STREET NORTH
 ST. PETERSBURG FL 33703**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State



DO NOT WRITE IN THIS SPACE

59-3592752

4. FEI Number

~~59-3217006~~

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

**DEW, JOHN C ESQ.
 150 SECOND AVENUE NORTH
 SUITE 1500
 ST. PETERSBURG FL 33701**

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	PD	<input type="checkbox"/> Delete
NAME	BROUGHTON, JAMES E	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BROUGHTON, KAY T	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BROUGHTON, MARK D	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33703	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BROUGHTON JR, JAMES E	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33703	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	DELUCIA, BROOKE B	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33703	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BROUGHTON, MATTHEW S	
STREET ADDRESS	3900 NINTH STREET NORTH	
CITY-ST-ZIP	SAINT PETERSBURG FL 33703	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: *James E Broughton*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2001 *727-520-1920*
 Date Daytime Phone #

CR2E034 (10/00)