

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000053394

FILED
Feb 26, 2002 8:00 AM
Secretary of State

Entity Name: DICESARE, DAVIDSON & BARKER, P.A.

Current Principal Place of Business:

5640 SOUTH FLORIDA AVE.
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7160
LAKELAND, FL 33807 US

New Mailing Address:

FEI Number: 59-3383477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARKER, HAROLD E
5640 S FLORIDA AVE
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARKER, HAROLD E
Address: 1109 LAKE POINTE TERR
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: DICESARE, PAT T II
Address: 2846 CHATSWORTH DR.
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: DAVIDSON, E. TAYLOR
Address: 705 EASTON DR.
City-St-Zip: LAKELAND, FL 33803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAT T. DICESARE, II

PRES

02/26/2002

Electronic Signature of Signing Officer or Director

Date