

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 125886

1. Entity Name

PENNSYLVANIA HOTEL BONDHOLDERS INC

FILED
Jan 22, 2001 8:00 am
Secretary of State

01-22-2001 90042 036 ***150.00

Principal Place of Business

Mailing Address

300 4TH ST N
P.O. BOX 1261
ST PETERSBURG FL 33731

300 4TH ST N
P.O. BOX 1261
ST PETERSBURG FL 33731

00005715



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-0520187

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BOND, WILLIAM
300-4TH ST N.
ST PETERSBURG FL 33701

Name

W. DAVID MOORE

Street Address (P.O. Box Number is Not Acceptable)

300 4th Street, N.

City

ST. PETERSBURG

FL

Zip Code

33701

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 W. DAVID MOORE, PRES.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

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
NAME BOND, SAMUEL F
STREET ADDRESS 300-4TH STREET NORTH
CITY-ST-ZIP ST PETERSBURG FL ☐ Delete

TITLE PD
NAME MOORE, W. DAVID
STREET ADDRESS 300-4TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG, FL. ☒ Change ☐ Addition

TITLE VD
NAME BOND, WILLIAM
STREET ADDRESS 300-4TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG FL ☐ Delete

TITLE VD
NAME MOORE, VICTORIA P.
STREET ADDRESS 300-4TH STREET NORTH
CITY-ST-ZIP ST. PETERSBURG, FL. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W. DAVID MOORE

1-06-01 (727) 502-5192

Date

Daytime Phone #

CR2E034 (10/00)

0524473