

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 215248

1. Entity Name

WILLIAMS, HATFIELD & STONER, INC.

FILED
Feb 15, 2000 8:00 am
Secretary of State

02-15-2000 90033 036 ***158.75

Principal Place of Business

2101 NORTH ANDREWS AVENUS
300
FT LAUDERDALE FL 33311
US

Mailing Address

2101 NORTH ANDREWS AVENUE
300
FT. LAUDERDALE FL 33311-3940
US

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 59-0844318

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

ANTHONY A. NOLAN
2101 N ANDREWS AVE
STE 300
FORT LAUDERDALE FL 33311

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, 2000 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 VD
NAME EBERHART, JAMES F
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

TITLE V
NAME PARK, JAMES E
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FT. LAUDERDALE FL 33311 ☐ Change ☒ Addition

TITLE TS
NAME GLERUM, DAN G
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

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

TITLE V
NAME HURLBERT, NANCY L
STREET ADDRESS 7101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FT LAUDERDALE FL ☐ Delete

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

TITLE V
NAME CAREY, MICHAEL L
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FORT LAUDERDALE FL ☐ Delete

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

TITLE DP
NAME NOLAN, A. ANTHONY
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FORT LAUDERDALE FL ☐ Delete

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

TITLE V
NAME WATTS, STEVEN M
STREET ADDRESS 2101 N ANDREWS AVE, STE 300
CITY-ST-ZIP FT LAUDERDALE FL ☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/00 954-566-8341

Date

Daytime Phone #

CR2E034 (9/99)