

FILED
Jun 06, 2002 8:00 am
Secretary of State

06-06-2002 90085 005 ***550.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 220473

1. Entity Name

TAMPA BAY JR. POSTERS, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5001 West Lemon Street

Suite, Apt. #, etc.

3. Mailing Address
5001 West Lemon Street

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Tampa, Florida

City & State
Tampa, Florida

4. FEI Number 59-0944773

Applied For
Not Applicable

Zip
33609

Country
U.S.A.

Zip
33609

Country
U.S.A.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
R. Reid Haney

Street Address (P.O. Box Number is Not Acceptable)
101 E. Kennedy Boulevard

Suite 4100

City
Tampa

FL

Zip Code
33602

**DO NOT WRITE
IN THIS SPACE**

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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

| | | | |
|--|---|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | P/D Ronald W. Hill 908 Worthington Drive Bridgeport, WV 26330 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V/S/D Cynthia L. Hill 908 Worthington Drive Bridgeport, WV 26330 | TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald W. Hill, President

6/3/02

304-842-10770

Daytime Phone #

CR2E034B (12/01)