

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 527639

1. Entity Name

PITTMAN & ASSOC., INC.

FILED
Jan 25, 2000 8:00 am
Secretary of State

01-25-2000 90123 049 ***150.00

Principal Place of Business

Mailing Address

3407 NORTH "L" STREET
PENSACOLA FL 32505

3407 NORTH "L" STREET
PENSACOLA FL 32505-5212

00007352

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 **59-1726635**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PITTMAN, OSCAR W.
3407 NORTH "L" STREET
PENSACOLA FL 32505

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

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	PITTMAN, OSCAR W.	
STREET ADDRESS	100 SAVANNAH ST.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	PITTMAN, LOU G.	
STREET ADDRESS	100 SAVANNAH ST.	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	President	<input type="checkbox"/> Delete
NAME	Oscar W. Pittman	
STREET ADDRESS	1015 Dunmire Street	
CITY-ST-ZIP	Pensacola, FL 32504	
TITLE	Secretary-treasurer	<input type="checkbox"/> Delete
NAME	Lou G. Pittman	
STREET ADDRESS	1015 Dunmire Street	
CITY-ST-ZIP	Pensacola, FL 32504	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Oscar W. Pittman

1/11/00

850-434-6666

Date

Daytime Phone #