

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2002 8:00 am**  
**Secretary of State**

02-21-2002 90083 024 \*\*\*150.00

**DOCUMENT # 557842**

1. Entity Name

**CARTER, BELCOURT & ATKINSON, P.A.**

Principal Place of Business

**500 S FLORIDA AVE 8 FLR  
LAKELAND FL 33801-5271  
US**

Mailing Address

**500 S FLORIDA AVE 8 FLR  
LAKELAND FL 33801-5271  
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**331 SOUTH FLA. AVE.**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

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6. Name and Address of Current Registered Agent

**MULLINS, DAVID  
500 S FL AVE  
8TH FLOOR  
LAKELAND FL 33801**

7. Name and Address of New Registered Agent

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, 2002 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 NAME	<b>TD MULLINS, DAVID L</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>500 S FL AVE 8TH FLOOR</b>	
CITY-ST-ZIP	<b>LAKELAND FL</b>	
TITLE NAME	<b>CPD ATKINSON, RONALD C.</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>500 S FL AVE 8TH FLOOR</b>	
CITY-ST-ZIP	<b>LAKELAND FL</b>	
TITLE NAME	<b>VD MURVIN, RICHARD H</b>	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	<b>500 S. FL AVE 8TH FLOOR</b>	
CITY-ST-ZIP	<b>LAKELAND FL</b>	
TITLE NAME	<b>VD FISK, ALAN C</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>500 S. FL AVE 8TH FLOOR</b>	
CITY-ST-ZIP	<b>LAKELAND FL</b>	
TITLE NAME	<b>SD GROSSMAN, JAMES E</b>	<input type="checkbox"/> Delete
STREET ADDRESS	<b>500 S. FL AVE 8TH FLOOR</b>	
CITY-ST-ZIP	<b>LAKELAND FL</b>	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	<b>V.P. / D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>331 S. FLA AVE #400</b>	
CITY-ST-ZIP		
TITLE NAME	<b>C.E.O / D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>331 S. FLA AVE #400</b>	
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	<b>V.P. / D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>331 S. FLA. AVE #400</b>	
CITY-ST-ZIP		
TITLE NAME	<b>CFO / D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	<b>331 S. FLA AVE #400</b>	
CITY-ST-ZIP		
TITLE NAME	<b>COO ATKINSON, JOHN</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	<b>331 S. FLA AVE #400</b>	
CITY-ST-ZIP	<b>LAKELAND, FL 33801</b>	

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:

**DAVID L. MULLINS**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1/21/02 863-687-4010**

CR2E034 (9/01)