

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 596559

1. Entity Name

ROBERT ALLAN FOSTER, JR., ATTORNEY AT LAW, A PRO

R

Principal Place of Business

512 E KENNEDY BLVD
TAMPA FL 33602

Mailing Address

512 E KENNEDY BLVD
TAMPA FL 33602

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

FOSTER, ROBERT ALLAN JR.
512 E KENNEDY BLVD
TAMPA, FL MH 33602

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PDTS
NAME FOSTER, ROBERT A JR
STREET ADDRESS 512 E KENNEDY BLVD
CITY-ST-ZIP TAMPA, FL 00000 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Jul 12, 2000 8:00 am
Secretary of State

07-12-2000 90009 036 ***150.00

AJ067370



DO NOT WRITE IN THIS SPACE

Doc# 596559

AD067370

ROBERT ALLAN FOSTER, JR.

ATTORNEY AT LAW
A PROFESSIONAL ASSOCIATION

512 EAST KENNEDY BOULEVARD
TAMPA, FLORIDA 33602

ROBERT ALLAN FOSTER, JR.
GEORGIANA M. PONDER

TEL (813) 223-3067
FAX (813) 221-5676
NET raf@prey.com

DIVISION OF CORPORATIONS
UNIFORM BUSINESS REPORT FILINGS
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

To Whom It May Concern,

Please find enclosed a check for \$150.00. I have just received this packet as of the 6th of July and hope that you will waive any penalties or fines. I am sorry for any inconvenience this has brought. My sincere apology to you.

Robert Allan Foster Jr.