

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90214 029 ***150.00

0327272 AV

DOCUMENT # 601195

1. Entity Name

EDWARD D. STONE, JR. AND ASSOCIATES, INC.



Principal Place of Business

% EDWARD D. STONE, JR.
1512 EAST BROWARD BLVD., SUITE 110
FORT LAUDERDALE FL 33301

Mailing Address

% EDWARD D. STONE, JR.
1512 EAST BROWARD BLVD., SUITE 110
FORT LAUDERDALE FL 33301

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 **59-1265229**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

STONE, EDWARD D. JR.
1512 EAST BROWARD SUITE 110
FORT LAUDERDALE FL 33301

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CD	<input type="checkbox"/> Delete
NAME	STONE, EDWARD D. JR	
STREET ADDRESS	151 STINGAREE POINT	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	COOLMAN, C. DOUGLAS	
STREET ADDRESS	1911 BAYVIEW DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	LALLI, JOSEPH J.	
STREET ADDRESS	601 N. VICTORIA PARK ROAD	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	COO	<input type="checkbox"/> Delete
NAME	SMITH, DOUGLAS C	
STREET ADDRESS	1701 NE 19TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33305	
TITLE	VD	<input type="checkbox"/> Delete
NAME	MILLER, JOHN W	
STREET ADDRESS	4363 BENEDICTINE CIRCLE	
CITY-ST-ZIP	ORLANDO FL	
TITLE	CFOT	<input type="checkbox"/> Delete
NAME	VENDRELL, JOAQUIN R	
STREET ADDRESS	1000 N.W. 161ST AVENUE	
CITY-ST-ZIP	PEMBROKE PINES FL	

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Edward D. Stone, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31 JAN 2003 (954) 524-3330

Date

Daytime Phone #

CR2E034 (10/02)