

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 656009

1. Entity Name

COMMUNICATION PLANNING CORPORATION

**FILED**  
**May 11, 2000 8:00 am**  
**Secretary of State**

05-11-2000 90322 048 \*\*\*150.00

Principal Place of Business

4160 SOUTHSIDE BLVD., SUITE 3  
 JACKSONVILLE FL 32216-5470  
 US

Mailing Address

4160 SOUTHSIDE BLVD., SUITE 3  
 JACKSONVILLE FL 32216-5470  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1972945

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BISBEE, FRANK D., III  
 4160 SOUTHSIDE BLVD., SUITE 3  
 JACKSONVILLE FL 32216

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE APD ☐ Delete

NAME BISBEE, FRANK D. III  
 STREET ADDRESS 4160 SOUTHSIDE BLVD #3  
 CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE ☐ Change ☐ Addition

TITLE SVD ☐ Delete

NAME BISBEE, ANNA G.  
 STREET ADDRESS 4160 SOUTHSIDE BLVD #3  
 CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME GILLO, MICHELLE R.  
 STREET ADDRESS 4160 SOUTHSIDE BLVD #3  
 CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ Change ☐ Addition

TITLE VD ☐ Delete

NAME SHANAHAN, MICHAEL A  
 STREET ADDRESS 4160 SOUTHSIDE BLVD #3  
 CITY-ST-ZIP JACKSONVILLE FL

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

TITLE ☐ Delete

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ 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 this 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: *Frank D. Bisbee III*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/10/00 904-645-9077  
 Date Daytime Phone #

CR2E034 (9/99)