## 2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

3. Mailing Address

City & State

Zip

**801 CHESTNUT STREET** 

CLEARWATER FL 33756

Suite, Apt. #, etc.

## **DOCUMENT # 715952**

1. Entity Name

Principal Place of Business

2. Principal Place of Business

801 CHESTNUT STREET

CLEARWATER FL 33756

Suite, Apt. #, etc.

City & State

Zip

PROSPECT TOWERS OF CLEARWATER, INC.



## FILED Jan 17, 2003 8:00 am Secretary of State

01-17-2003 90134 015 \*\*\*\*70.00



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-1366141 Applied For Not Applicable

7. Name and Address of New Registered Agent

5. Certificate of Status Desired

\$8.75 Additional Fee Required

FITE, JOHN, ESQUIRE RICHARDS, NODINE, FITE, ETAL, PA 1253 PARK STREET CLEARWATER FL 33516

Country

6. Name and Address of Current Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

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.

Country

Name

City

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to

Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE X Delete TITLE A Change ☐ Addition BELCHER, CHARLES NAME Kenneth Smith 901 Oakview Avenue NAME STREET ADDRESS 975 BAYSHORE DR N STREET ADDRESS CITY-ST-7IP SAFETY HARBOR FL CITY-ST-ZIP Clearwater, 71 33756 TITLE ☐ Delete TITLE ☐ Addition JUSTICE, WILLIAM NAME NAME STREET ADDRESS 1912 CLEVELAND STREET STREET ADDRESS CITY-ST-ZIP CLEARWATER FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition PERKINS, DAVID NAME NAME STREET ADDRESS 919 BAY ESPLANADE STREET ADDRESS CITY-ST-ZIP CLEARWATER FL CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME TICE, GEORGE NAME STREET ADDRESS 2292 CASTAN RICAN DR #20 STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33763** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change **ROBINSON DEAN** NAME STREET ADDRESS 1327 DUNCAN AVE. S. STREET ADDRESS CITY-ST-ZIP CLEARWATER, FL 00000 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition HALE, WILLIAM DR. NAME NAME STREET ADDRESS 2307 JONES CT STREET ADDRESS CITY-ST-7IP **DUNEDIN FL 34698** 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 fustee empowered to execute this report as required by Chapter 617, 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:

1/14/03 727-447-5701