

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 720906

1. Entity Name

THE FINANCIAL ANALYSTS SOCIETY OF TAMPA BAY, INC

Principal Place of Business

P O BOX 4097  
SARASOTA FL 34230-097  
US

Mailing Address

PO BOX 1136  
TAMPA FL 33601  
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

**FILED**  
**Mar 05, 2001 8:00 am**  
**Secretary of State**

03-05-2001 90347 044 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-6592262

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

RADER, JACK D  
17822 EAGLE TRACE  
TAMPA FL 33647

7. Name and Address of New Registered Agent

Name

Alicia L Bryan

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

2451 McMullen Booth Rd Ste 315

City

Clearwater

FL

Zip Code

33759

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

*Alicia L. Bryan*

0/28/01

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

(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**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
RADAR, JACK S  
4202 FOWLER AVE USF COBA  
TAMPA FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
BRYAN, ALICIA L  
2451 N MCMULLEN BOOTH RD  
CLEARWATER FL ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
ULRICH, KURT  
1502 AVE N #800  
SAINT PETERSBURG FL 33701 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
YOUNG, JAMES M  
5408 BAY STATE RD  
PALMETTO FL 34221 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MULLIN, BRUCE  
1605 MAIN STREET STE 400  
SARASOTA FL 34230 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
SHIPLEY, GLENN  
1515 RINGLING BLVD  
SARASOTA FL 34236 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
ERIC BAILEY  
102 W WHITING ST STE 602  
TAMPA FL 33602-5140 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
STE 315 ☒ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GEORGE LINARDOS  
2701 N ROCKY PT DR STE 700  
TAMPA FL 33607 ☐ Change ☒ Addition

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

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

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

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 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:

*Alicia L. Bryan*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01

(727) 799-4991

Date

Daytime Phone #

CR2E037 (10/00)