

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746199

1. Entity Name

FLORIDA TAXWATCH RESEARCH INSTITUTE, INC.

Principal Place of Business

106 N BRONOUGH ST
TALLAHASSEE FL 32301
US

Mailing Address

P O BOX 10209
TALLAHASSEE FL 32302
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1918055

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CALABRO, DOMINIC M
106 N BRONOUGH ST
TALLAHASSEE FL 32301

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

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

Trustees

10. OFFICERS AND DIRECTORS

TITLE SD ☐ Delete
NAME SINK, ADELAIDE A
STREET ADDRESS 50 N. LAURA ST 42 FLOOR
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE PDCE ☐ Delete
NAME CALABRO, DOMINIC M
STREET ADDRESS 106 N. BRONOUGH ST
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE CED ☐ Delete
NAME HOLLIS, MARK C
STREET ADDRESS 1936 GEORGE JENKINS BLVD.
CITY-ST-ZIP LAKELAND FL 33802

TITLE TD ☐ Delete
NAME O'TOOLE, WILLIAM A
STREET ADDRESS P.O BOX 10000 N/A
CITY-ST-ZIP LAKE BUENA VISTA FL

TITLE CD ☐ Delete
NAME LACHER, JOSEPH P
STREET ADDRESS 150 W FLAGLER ST SUITE 1901
CITY-ST-ZIP MIAMI FL 33130

TITLE CED ☐ Delete
NAME O'NEAL, DOUGLAS T
STREET ADDRESS 1776 AMERICAN HERITAGE LIFE DRIVE
CITY-ST-ZIP JACKSONVILLE FL 32224

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE B/T ☒ Change ☐ Addition
NAME Douglas, T. O'Neal
STREET ADDRESS 1776 American Heritage Life Drive
CITY-ST-ZIP Jacksonville FL 32224

TITLE P/M ☐ Change ☐ Addition
NAME Calabro, Dominic M
STREET ADDRESS 106 N Bronough St.
CITY-ST-ZIP Tallahassee, FL 32301

TITLE VC/T ☐ Change ☒ Addition
NAME Evans, Steve L
STREET ADDRESS 101 N Monroe St., Ste 750
CITY-ST-ZIP Tallahassee, FL 32301

TITLE S/T ☐ Change ☒ Addition
NAME Barnett, Hoyt R.
STREET ADDRESS P.O Box 407
CITY-ST-ZIP Lakeland FL 33802

TITLE T/T ☒ Change ☐ Addition
NAME O'Toole, William A
STREET ADDRESS P.O Box 10000 N/A
CITY-ST-ZIP Lake Buena Vista, FL 32830

TITLE T ☒ Change ☐ Addition
NAME Lacher, Joseph P.
STREET ADDRESS 150 W. Flagler St., Ste 1901
CITY-ST-ZIP Miami FL 33130

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:

Signature of Dominic M. Calabro

January 12, 2001

(PRO) 222-5052

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (10/00)

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