

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2001 8:00 am
Secretary of State

03-06-2001 90325 004 ***150.00

DOCUMENT # F00000003823

1. Entity Name

SELECTIVE HR SOLUTIONS IV, INC.

Principal Place of Business

**6414 14TH STREET
 BRADENTON FL 34207**

Mailing Address

**6414 14TH STREET
 BRADENTON FL 34207**

2. Principal Place of Business

6920 Professional Pkwy E

3. Mailing Address

6920 Professional Pkwy E

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number **52-1810171**

Applied For

Not Applicable

Zip

Country

34240 USA

Zip

Country

34240 USA

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

**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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, 2001 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	PCEO	<input type="checkbox"/> Delete
NAME	CLANCY, ROBERT J	
STREET ADDRESS	6414 14TH STREET	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	SULLIVAN, DANIEL J	
STREET ADDRESS	6414 14TH STREET	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	S	<input type="checkbox"/> Delete
NAME	NIERODA, MICHELE C	
STREET ADDRESS	40 WANTAGE AVENUE	
CITY-ST-ZIP	BRANCHVILLE NJ 07890	
TITLE	V	<input type="checkbox"/> Delete
NAME	DUNCAN, JOEL D	
STREET ADDRESS	6414 14TH STREET	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	V	<input type="checkbox"/> Delete
NAME	SIMONSON, MARGARET R	
STREET ADDRESS	6414 14TH STREET	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE	V	<input type="checkbox"/> Delete
NAME	LACY, JOHN T	
STREET ADDRESS	6414 14TH STREET	
CITY-ST-ZIP	BRADENTON FL 34207	

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	6920 Professional Pkwy E
CITY-ST-ZIP	Sarasota, FL 34240
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	6920 Professional Pkwy E
CITY-ST-ZIP	Sarasota, FL 34240
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	6920 Professional Pkwy E
CITY-ST-ZIP	Sarasota, FL 34240
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	6920 Professional Pkwy E
CITY-ST-ZIP	Sarasota, FL 34240
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	6920 Professional Pkwy E
CITY-ST-ZIP	Sarasota, FL 34240

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daniel J. Sullivan

2/28/01

Date

941-755-4634

Daytime Phone #

CR2E034 (10/00)