

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 14, 2003 8:00 am**  
**Secretary of State**

04-14-2003 90378 002 \*\*\*150.00

**DOCUMENT # F32110**

1. Entity Name  
**JOSEPH K. STILL, JR., P.A.**



Principal Place of Business

~~500 AUSTRALIAN AVE SO~~  
~~CLEARLAKE PLAZA ST 600~~  
~~W PALM BEACH FL 33401~~  
~~US~~

Mailing Address

~~500 AUSTRALIAN AVE SO~~  
~~CLEARLAKE PLAZA ST 600~~  
~~W PALM BEACH FL 33401~~  
~~US~~



2. Principal Place of Business

**1615 Forum Place, #500**  
Suite, Apt. #, etc.  
**West Palm Beach, FL**  
City & State

3. Mailing Address

**1615 Forum Place, #500**  
Suite, Apt. #, etc.  
**West Palm Beach, FL**  
City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2097748**

Applied For  
Not Applicable

Zip  
**33401**

Country  
**Palm Beach**

Zip  
**33401**

Country  
**Palm Beach**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**STILL, JOSEPH K., JR.**

~~500 AUSTRALIAN AVE SO~~  
~~CLEARLAKE PLAZA ST 600~~  
~~W PALM BEACH FL 33401~~

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
**1615 Forum Place, #500**

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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**4/11/03**

**FILE NOW!!! FEE IS \$150.00.**  
**After May 1, 2003 Fee will be \$550.00.**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>STILL, JOSEPH K., JR.</b>	
STREET ADDRESS	<b>88 SPARROW COURT</b>	
CITY - ST - ZIP	<b>ROYAL PALM BCH FL</b>	
TITLE	<b>STD</b>	<input type="checkbox"/> Delete
NAME	<b>STILL, JOSEPH K., JR.</b>	
STREET ADDRESS	<b>88 SPARROW COURT</b>	
CITY - ST - ZIP	<b>ROYAL PALM BCH FL</b>	
TITLE		<input type="checkbox"/> Delete
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NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 trustee empowered to execute this report as required by Chapter 607, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**4/11/03**

CR2E034 (10/02)