

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90516 005 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #F34578 1. Entity Name DIVITO & HIGHAM, P.A.					
Principal Place of Business % FREDERICK A HIGHAM, JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711			Mailing Address % FREDERICK A HIGHAM, JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 59-2092578	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent HIGHAM, FREDERICK A, JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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.			I am familiar with, and accept the obligations of registered agent.		
SIGNATURE:			DATE: 4/15/03		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$6.00 May Be Added to Fees			10. OFFICERS AND DIRECTORS		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			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:			DATE: 4/15/03		

11004046

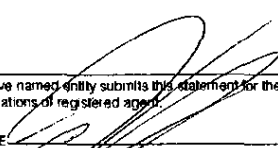
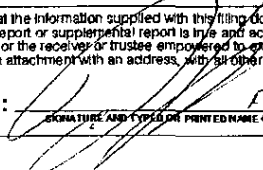


☐ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)

Attachment

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F34578 - 11004046			
1. Entity Name DIVITO & HIGHAM, P.A.			
Principal Place of Business % FREDERICK A HIGHAM, JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711		Mailing Address % FREDERICK A HIGHAM, JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number: 59-2092578		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HIGHAM, FREDERICK A., JR 4514 CENTRAL AVENUE ST PETERSBURG, FL 33711		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
B. 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: 		DATE: 4/15/03	
NOTE: Registered Agent Signature required when eliminating		DATE	
FILE FILING FEE IS \$150.00 Annual May 1, 2003 Filing Fee is \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DIVITO, JOSEPH A 4514 CENTRAL AVE SAINT PETERSBURG, FL 33711 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STVD HIGHAM, FREDERICK A 4514 CENTRAL AVE SAINT PETERSBURG, FL 33711 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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SIGNATURE: 		Date: 4/15/03 727-321-1201	
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CPRE034 (10/02)