

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F62601

1. Entity Name
USSOUTH HOLDING CORP.

Principal Place of Business

410 E. MCEWEN DR
OSPREY FL 34229
US

Mailing Address

P O BOX 1046
OSPREY FL 34229
US

2. Principal Place of Business

7666 FAIRWAY WOODS DR. PO BOX 18028

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State
SARASOTA, FL

City & State
SARASOTA, FL

Zip
34238

Country
USA

Zip
34276

Country
USA

4. FEI Number 59-2153397

Applied For
Not Applicable

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

WEITZNER, ARTHUR S
410 E. MCEWEN DR
OSPREY FL 34229

Name ARTHUR S. WEITZNER

Street Address (P.O. Box Number is Not Acceptable)
7666 FAIRWAY WOODS DRIVE

City SARASOTA FL Zip Code 34238

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 *Arthur S. Weitzner* ARTHUR S. WEITZNER

3/16/01

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 VD
NAME WEITZNER, BRIGITTE
STREET ADDRESS 410 E. MCEWEN DR
CITY-ST-ZIP OSPREY FL 34229 ☐ Delete

TITLE VD
NAME WEITZNER, BRIGITTE
STREET ADDRESS 7666 FAIRWAY WOODS DRIVE
CITY-ST-ZIP SARASOTA, FL 34238 ☒ Change ☐ Addition

TITLE PD
NAME WEITZNER, ARTHUR S
STREET ADDRESS 410 E. MCEWEN DR
CITY-ST-ZIP OSPREY FL 34229 ☐ Delete

TITLE PD
NAME ARTHUR S WEITZNER
STREET ADDRESS 7666 FAIRWAY WOODS DRIVE
CITY-ST-ZIP SARASOTA, FL 34238 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Delete

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

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: ARTHUR S. WEITZNER *Arthur S. Weitzner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/01

Date

(941) 927-5471

Daytime Phone #

CR2E034 (10/00)



DO NOT WRITE IN THIS SPACE

FILED

Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90325 043 ***150.00