

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90002 009 \*\*\*158.75

**DOCUMENT # F73570**

1. Entity Name

**BLOUNT SIKES & ASSOCIATES, INC.**

Principal Place of Business

**3032 MERCY DR  
 PO BOX 547759  
 ORLANDO FL 32854-7759  
 US**

Mailing Address

**3032 MERCY DR  
 P O BOX 547759  
 ORLANDO FL 32854-7759  
 US**

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

**59-2182328**

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

**BOYLES, WILLIAM A  
 301 EAST PINE STREET  
 STE 1400  
 ORLANDO FL 32801**

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, 2002 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 NAME STREET ADDRESS CITY-ST-ZIP	VD BLOUNT, WESLEY E. 3032 MERCY DRIVE ORLANDO FL 32808-3148	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<del>VD</del> ROCKETT, LOWRY E. 3032 MERCY DRIVE ORLANDO FL 32808-3148	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD SIKES, JOHN M. 3032 MERCY DRIVE ORLANDO FL 32808-3148	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Huckeba, James C. 3032 Mercy Drive Orlando, FL 32808-3148	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

**SIGNATURE REQUIRED**  
 Lowry E. Rockett, President

1/29/02

Date

407-894-3804

Daytime Phone #

CR2E034 (9/01)

ATTACHMENT DOC# F73570

GRAY, HARRIS & ROBINSON

PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

SUITE 1400

301 EAST PINE STREET

POST OFFICE BOX 3068

ORLANDO, FLORIDA 32802-3068

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WRITER'S DIRECT DIAL

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Paralegal

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February 4, 2002

Annual Reports Filing  
Division of Corporations  
Post Office Box 1500  
Tallahassee, FL 32302-1500

Re: 2002 Uniform Business Report  
BLOUNT SIKES & ASSOCIATES, INC.  
Document #: F73570

Dear Sir or Madam:

I am enclosing with this letter the above-referenced Uniform Business Report. Also enclosed is a check in the amount of \$158.75 representing the \$150.00 filing fee and \$8.75 to cover the fee for a Certificate of Status.

Please forward the Certificate of Status for this corporation to the undersigned.

If you have any questions with respect to this filing, please feel free to contact the undersigned.

Sincerely,

*Barbara Buchanan*

Barbara S. Buchanan  
Paralegal

bsb  
Enclosures

