

2000 UNIFORM BUSINESS REPORT (UBR)

AMENDED

DOCUMENT # F74129

1. Entity Name

DICKENSON, REX and SLOAN, P.A.

Principal Place of Business

990 NORTH FEDERAL HIGHWAY STE 410
BOCA RATON FL 33432

Mailing Address

990 NORTH FEDERAL HIGHWAY STE 410
BOCA RATON FL 33432

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2180007

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DICKENSON, DAVID B
990 NORTH FEDERAL HIGHWAY STE 410
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

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)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD David B. Dickenson Delete
NAME 980 N. Federal Hwy., #410
STREET ADDRESS Boca Raton, FL 33432
CITY-ST-ZIP

TITLE SD Robert H. Rex Delete
NAME 980 N. Federal Hwy., Suite 410
STREET ADDRESS Boca Raton, FL 33432
CITY-ST-ZIP

TITLE TD Barbara A. Sloan Delete
NAME 980 N. Federal Hwy., #410
STREET ADDRESS Boca Raton, FL 33432
CITY-ST-ZIP

TITLE VPD Richard A. Murdoch Delete
NAME 980 N. Federal Hwy., Suite 410
STREET ADDRESS Boca Raton, FL 33432
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD Change Addition
NAME David B. Dickenson
STREET ADDRESS 980 N. Federal Hwy., #410
CITY-ST-ZIP Boca Raton, FL 33432

TITLE VPD Change Addition
NAME Robert H. Rex
STREET ADDRESS 980 N. Federal Hwy., Suite 410
CITY-ST-ZIP Boca Raton, FL 33432

TITLE S/TD Change Addition
NAME Barbara A. Sloan
STREET ADDRESS 980 N. Federal Hwy., #410
CITY-ST-ZIP Boca Raton, FL 33432

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Date

Daytime Phone #

FILED
00 OCT 13 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CE09034 JK/00

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Dickenson, Rex and
Sloan, P.A.

File Second

X00789, 00524, 00672

Signature _____

Requested by: _____

Name

Date

Time

Walk-In _____

Will Pick Up _____

___ Art of Inc. File _____

___ LTD Partnership File _____

___ Foreign Corp. File _____

___ L.C. File _____

___ Fictitious Name File _____

___ Trade/Service Mark _____

___ Merger File _____

___ Art. of Amend. File _____

___ RA Resignation _____

___ Dissolution / Withdrawal _____

Annual Report / Reinstatement Amended

___ Cert. Copy _____

Photo Copy _____

___ Certificate of Good Standing _____

___ Certificate of Status _____

___ Certificate of Fictitious Name _____

___ Corp Record Search _____

___ Officer Search _____

___ Fictitious Search _____

___ Fictitious Owner Search _____

___ Vehicle Search _____

___ Driving Record _____

___ UCC 1 or 3 File _____

___ UCC 11 Search _____

___ UCC 11 Retrieval _____

___ Courier _____

RECEIVED
00 OCT 13 AM 11:08
CORPORATION DIVISION
TALLAHASSEE, FLORIDA