

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005087

1. Entity Name

HANBURY EVANS NEWILL VLATTAS & COMPANY, INC.

FILED
May 13, 2000 8:00 am
Secretary of State

05-13-2000 90011 039 ***158.75

Principal Place of Business

Mailing Address

ATLANTIC ST.
VA 23510

120 ATLANTIC ST.
NORFOLK VA 23510-1711

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

54-1099578

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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, 2000 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 C
NAME HANBURY, JPC
STREET ADDRESS 208 WASHINGTON ST.
CITY-ST-ZIP PORTSMOUTH VA 23704

☐ Delete

TITLE
NAME
STREET ADDRESS PO Box 369
CITY-ST-ZIP IRVINGTON VA 23480

☒ Change ☐ Addition

TITLE DP
NAME EVANS, S. MICHAEL
STREET ADDRESS 18 WAGNER ROAD
CITY-ST-ZIP POQUOSON VA 23662

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DST
NAME VLATTAS, NICHOLAS E
STREET ADDRESS 102 FLAG CREEK ROAD
CITY-ST-ZIP YORKTOWN VA 23693

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DV
NAME WRIGHT, JANE C
STREET ADDRESS 1567 BLANFORD CIRCLE
CITY-ST-ZIP NORFOLK VA 23505

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP

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☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/25/00

(757) 321-9600

CR2E034 (9/99)