

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Feb 01, 2000 08:00 AM****Secretary of State****DOCUMENT # G94133****1. Entity Name**

SMOOT ADAMS EDWARDS & GREEN, P.A.

Principal Place of Business12800 UNIVERSITY DRIVE, STE 600
P.O. BOX 60259
FT MYERS FL 33907**Mailing Address**12800 UNIVERSITY DRIVE, STE 600
P.O. BOX 60259
FT MYERS FL 33907**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****59-2397224****Applied For****Not Applicable****5. Certificate of Status Desired**☐**\$8.75 Additional
Fee Required****6. Name and Address of Current Registered Agent**GREEN BRUCE D
12800 UNIVERSITY DR, STE 600

FT. MYERS FL 33907 US**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)

02/01/2000

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**

TITLE	VD	<input type="checkbox"/> Delete
NAME	KOMRAY MARK R.	
STREET ADDRESS	12800 UNIVERSITY DR., #600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	VD	<input type="checkbox"/> Delete
NAME	WINER, STEVEN L.	
STREET ADDRESS	12800 UNIVERSITY DR, 600	
CITY-ST-ZIP	FT MYERS FL 33907	

TITLE	DV	<input type="checkbox"/> Delete
NAME	ADAMS, HAL	
STREET ADDRESS	12800 UNIVERSITY DR, 600	
CITY-ST-ZIP	FT MYERS FL 33907	

TITLE	PSTD	<input type="checkbox"/> Delete
NAME	GREEN BRUCE D.	
STREET ADDRESS	12800 UNIVERSITY DR., #600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	CEOD	<input type="checkbox"/> Delete
NAME	EDWARDS CHARLES B.	
STREET ADDRESS	12800 UNIVERSITY DRIVE, 600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	PD	<input type="checkbox"/> Delete
NAME	SMOOT, J. TOM, JR.	
STREET ADDRESS	12800 UNIVERSITY DR, 600	
CITY-ST-ZIP	FT MYERS FL 33907	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOMRAY MARK R	
STREET ADDRESS	12800 UNIVERSITY DR., #600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINER STEVEN I	
STREET ADDRESS	12800 UNIVERSITY DR, #600	
CITY-ST-ZIP	FT MYERS FL 33907	

TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS HAL	
STREET ADDRESS	12800 UNIVERSITY DR, #600	
CITY-ST-ZIP	FT MYERS FL 33907	

TITLE	PSTD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREEN BRUCE D	
STREET ADDRESS	12800 UNIVERSITY DR., #600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	CEOD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EDWARDS CHARLES B	
STREET ADDRESS	12800 UNIVERSITY DRIVE, #600	
CITY-ST-ZIP	FT. MYERS FL 33907	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMOOT, JR J. TOM	
STREET ADDRESS	12800 UNIVERSITY DR, #600	
CITY-ST-ZIP	FT MYERS FL 33907	

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:** Steven L. Winer

VD 02/01/2000