2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H36956

2001 UNIFORM BUSINESS REPORT (UBR)						R)	FILED
DOCUMENT # H36956 1. Entity Name							Apr 16, 2001 8:00 am Secretary of State
HOLEMAN SUMAN ARCHITECTS, INC.							04-16-2001 90001 001 ***150.00
Principal Pla	ce of Busines	s	Mailing Address				
2101 S. WAVERLY PLACE SUITE 100 MELBOURNE FL 32901 US			2101 S WAVERLE PL STE 100 MELBOURNE FL 32901 US				L LOCKEN BLOCK HING BING TORS BING COM BITTO BY BY BIRG BING BIRG BIRG BIRG
2. Principal Place of Business			3. Mailing Address				
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE
City & State			City & State		4.	FEI Number 59-2490342 Applied For Not Applicable	
Zip	Zip Country		Zip Country		5.	Certificate of Status Desired See Required Fee Required	
6. Name and Address of Current Registered Agent						7.	Name and Address of New Registered Agent .
HOLEMAN, VAUGHN D					Name		
2101 S WAVERLY PL STE 100				}	Street Address (P.O. Box Number is Not Acceptable)		
MELBOURNE FL 32901							
			City			FL Zip Code	
8. The above	e named entity	y submits this statement for	the purpose of changing its	registere	d office o	registered ac	gent, 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, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			50.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.
11.		OFFICERS AND D	DIRECTORS	12.			DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE	CVPS			TITLE		VS	☐ Change ☐ Addition
NAME	SUMAN, C			NAME		SUMA	N, CRAIG A. SOUTH WAVERLY PLACE, STELOD
STREET ADDRESS CITY-ST-ZIP	,	2101 0 17/12/12/12 0:2 100		STREET CITY-S	r address St-Zip		South waverly place, stelly southe fl 32901
TITLE	CP		☐ Delete	TITLE		6	Pages Addition
NAME		i, vaughn d.		NAME		HOLE	MAN, VAVAHOD.
STREET ADDRESS		AVERLY PL STE 100			ADDRESS	2101 5	SOUTH WAYERLY PLACE, SITE 100
CITY-ST-ZIP	MELBOUR			CITY-S		MELE	MAN, VAVGHN D. SOUTH WAVERLY PLACE, STE 100 LOURHE FL 3290)
ب جبد منظل NAME	CVP	The same as the		TITLE NAME	·		nange I Lagnition
STREET ADDRESS				ADDRESS	DENNIS, LORI ANNI 2101 SOUTH WAVERLY PLACE, STE 100		
CITY-ST-ZIP	MELBOUR			CITY-S		MB1 4	SOURNE FL 32901
TITLE			☐ Delete	TITLE			☐ Change ☐ Addition
NAME	1			NAME			- -
STREET ADDRESS CITY-ST-ZIP			STREET CITY-S	ADDRESS ST-ZIP		·	
TITLE			☐ Delete	TITLE	TITLE		☐ Change ☐ Addition
NAME				NAME			
STREET ADDRESS					ADDRESS T		
CITY-ST-ZIP	L			CITY-S	0.7711		•

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 flustee 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

☐ Change

Addition