

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H61778

1. Entity Name

B.F.S.B. FINANCIAL SERVICES, INC.

FILED

Jan 20, 2000 8:00 am  
Secretary of State

01-20-2000 90219 032 \*\*\*158.75

Principal Place of Business

Mailing Address

5537 SHELDON RD  
STE. D  
TAMPA FL 33615  
US

P O BOX 31125  
STE. D  
TAMPA FL 33631-3125  
US

A0008769



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2811193

Applied For

Not Applicable

Zip

Country

Zip

Country

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

YOUNG, RONALD A  
5537 SHELDON ROAD, STE. D  
STE. D  
TAMPA FL 33615

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 D ☐ Delete  
NAME NERNBERG, A. RICHARD  
STREET ADDRESS 5537 SHELDON RD., STE. D  
CITY-ST-ZIP TAMPA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME EYPD  
STREET ADDRESS YOUNG, RONALD A.  
CITY-ST-ZIP 5537 SHELDON RD., SUITE D  
TAMAPA FL

TITLE ☒ Change ☐ Addition  
NAME PD  
STREET ADDRESS YOUNG, RONALD A.  
CITY-ST-ZIP 5537 SHELDON RD, SUITE D  
TAMPA, FL 33615

TITLE ☐ Delete  
NAME VPT  
STREET ADDRESS BEITELSHEES, KERWIN L  
CITY-ST-ZIP 5537 SHELDON RD STE D  
TAMPA FL 33615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME S  
STREET ADDRESS SOWRY, BRENDA  
CITY-ST-ZIP 5537 SHELDON RD., STE D  
TAMPA FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Delete  
NAME PD  
STREET ADDRESS LISZKA, JOHN  
CITY-ST-ZIP 5537 SHELDON RD STE D  
TAMPA FL 33615

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS PHILIP F. PALMER  
CITY-ST-ZIP 12508 LIMPET DR  
TAMPA, FL 33625

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:

*Ronald A. Young*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
RONALD A. YOUNG, PRESIDENT

1/6/00

813-886-5626

Date

Daytime Phone #

CR2F034 (9/99)