

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H90298

1. Entity Name

SNED, PRUITT, D'ANGIO & TUCKER P.A.

FILED
Jun 05, 2000 8:00 am
Secretary of State

06-05-2000 90044 040 ***550.00

00060211



DO NOT WRITE IN THIS SPACE

Principal Place of Business
218 DATURA STREET
P. O. BOX 3746
WEST PALM BEACH FL 33402

Mailing Address
218 DATURA STREET
P. O. BOX 3746
WEST PALM BEACH FL 33402-3746

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2630776**
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

SNED, WILLIAM H JR
218 DATURA STREET
WEST PALM BEACH FL 33402

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 _____ (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	VD	<input type="checkbox"/> Delete
NAME	D'ANGIO, ROBERT A., JR.	
STREET ADDRESS	218 DATURA STREET	
CITY-ST-ZIP	W. PALM BCH FL 33401	
TITLE	PD	<input type="checkbox"/> Delete
NAME	SNED, WILLIAM H, JR	
STREET ADDRESS	218 DATURA STREET	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	SD	<input type="checkbox"/> Delete
NAME	TUCKER, JOAN B.	
STREET ADDRESS	218 DATURA STREET	
CITY-ST-ZIP	W.PALM BCH. FL	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PRUITT, WILLIAM H	
STREET ADDRESS	218 DATURA ST	
CITY-ST-ZIP	WEST PALM BCH FL 33401	
TITLE	VD	<input type="checkbox"/> Delete
NAME	PRUITT, WILLIAM E	
STREET ADDRESS	218 DATURA STREET	
CITY-ST-ZIP	W. PALM BEACH FL 33401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-25-00 (361) 655-8631
Date Daytime Phone #

CR2E034 (9/99)