

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J04214

1. Entity Name

DAVID M. WIESENFELD, P.A.

**FILED**  
Feb 04, 2000 8:00 am  
Secretary of State

02-04-2000 90035 015 \*\*\*150.00

Principal Place of Business

Mailing Address

~~1400 KINGSLEY AVE~~  
320 E. ADAMS ST. Jacksonville, Fla.  
~~ORANGE PARK FL 32073~~ 32202  
US

~~1400 KINGSLEY AVE~~  
320 E. ADAMS ST. Jacksonville Fla.  
~~ORANGE PARK FL 32073-4330~~ 32202  
US

2. Principal Place of Business

3. Mailing Address

320 E. Adams St.

320 E. Adams St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Jacksonville, Fla.

Jacksonville, Fla.

City & State

City & State

4. FEI Number

59-2623412

Applied For

Not Applicable

Zip

32202

Country

U.S.

Zip

32202

Country

U.S.

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

WIESENFELD, DAVID M

~~1400 KINGSLEY AVE~~  
~~ORANGE PARK FL 32073~~

320 E. Adams St.  
Jacksonville, Fla.  
32202

Name

DAVID M. WIESENFELD

Street Address (P.O. Box Number Not Acceptable)

320 E. Adams St.

City

Jacksonville, Fla.

FL

Zip Code

32202

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

*DM Wiesefeld*

Signature typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

31 Jan 00

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 NAME ☒ Delete  
P  
WIESENFELD, DAVID M.  
STREET ADDRESS ~~1400 KINGSLEY AVE~~ 320  
CITY-ST-ZIP ~~ORANGE PARK FL 32073~~

TITLE NAME ☒ Change ☐ Addition  
DAVID M. WIESENFELD  
STREET ADDRESS 320 E. Adams St.  
CITY-ST-ZIP Jacksonville, Fla. 32202

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE NAME ☐ Change ☐ Addition  
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:

*DM Wiesefeld*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

31 Jan 00

Date

904-355-1000

Daytime Phone #

CR2E034 (9/99)