

# 2000 UNIFORM BUSINESS REPORT (UBR)

0400606

DOCUMENT # J26785

1. Entity Name

THE HOGAN GROUP, INC.

FILED

00 MAR -8 PM 1:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

101 E. KENNEDY BLVD., #4000  
TAMPA FL 33602

101 E. KENNEDY BLVD., #4000  
TAMPA FL 33602-5152

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-2717917

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UBRANO, ANDREW J.  
101 E KENNEDY BLVD 3700  
TAMPA FL 33602

Name Raymond E. Mills  
Street Address (P.O. Box Number is Not Acceptable)  
101 E. Kennedy Blvd.  
Suite 4000  
City Tampa FL Zip Code 33602

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

Raymond E. Mills 2/16/00

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 PSTD  
NAME HOGAN, MICHAEL D.  
STREET ADDRESS 101 E. KENNEDY BLVD., #4000  
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE Vice President & Secretary  
NAME Michael D. Hogan  
STREET ADDRESS 101 E. Kennedy Blvd. Suite 4000  
CITY-ST-ZIP Tampa FL 33602 ☒ Change ☐ Addition

TITLE VPS  
NAME MILLS, RAY  
STREET ADDRESS 101 E. KENNEDY BLVD., #4000  
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE President and COO  
NAME Raymond E. Mills  
STREET ADDRESS 101 E. Kennedy  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE VP  
NAME BISHOP, ROBIN Y  
STREET ADDRESS 101 E KENNEDY BLVD #4000  
CITY-ST-ZIP TAMPA FL 33602 ☒ Delete

TITLE  
NAME  
STREET ADDRESS 500003171583-12  
CITY-ST-ZIP -03/15/00--01101--012  
\*\*\*\*150.00 \*\*\*\*150.00

TITLE  
NAME  
STREET ADDRESS 101 E. Kennedy Blvd. Suite 4000  
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE Vice President  
NAME John J. Twomey, III  
STREET ADDRESS 101 E. Kennedy Blvd. Suite 4000  
CITY-ST-ZIP Tampa FL 33602 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Raymond E. Mills President

CR2E034 (9/99)