

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J28242

1. Entity Name

PIONEER PLAZA INCORPORATED

**FILED**  
**Jan 19, 2001 8:00 am**  
**Secretary of State**

01-19-2001 90032 037 \*\*\*150.00

Principal Place of Business  
139 HICKPOOCHEE AVE EAST  
LABELLE FL 33975  
US

Mailing Address  
PO BOX 816  
LABELLE FL 33935  
US

603664



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 59-2757748

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

MILHOLLAND, JACK W JR  
139 HICKPOOCHEE AVE E.  
LABELLE FL 33935

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, 2001 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 P  
NAME ROGERS, BURT K  
STREET ADDRESS 1255 N GULFSTREAM AVE 1005  
CITY-ST-ZIP SARASOTA FL ☐ Delete

TITLE  
NAME Add Zip code ☒ Change ☐ Addition  
STREET ADDRESS 34236  
CITY-ST-ZIP

TITLE VS  
NAME MILHOLLAND, JACK W JR  
STREET ADDRESS 6885 CORAL CIR  
CITY-ST-ZIP SARASOTA FL ☐ Delete

TITLE  
NAME Add Zip code ☒ Change ☐ Addition  
STREET ADDRESS 34243  
CITY-ST-ZIP

TITLE VT  
NAME ELWELL, ALAN M  
STREET ADDRESS 3311 WEBBLER WOODS DR.  
CITY-ST-ZIP SARASOTA FL ☐ Delete

TITLE  
NAME Add Zip code ☒ Change ☐ Addition  
STREET ADDRESS 34240  
CITY-ST-ZIP

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  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jack W. Milholland Jr. 1/4/01 863-605-2301

CR2E034 (10/00)