

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J31955

1. Entity Name
PRIVETT & ASSOC. OF FLORIDA, INC.

Principal Place of Business
2732 TOWNSEND BLVD.
JACKSONVILLE FL 32211

Mailing Address
2732 TOWNSEND BLVD.
JACKSONVILLE FL 32211

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 59-2720079

Applied For
Not Applicable

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

PRIVETT, PARK D., JR.
11449 LAUREL GREENWAY NORTH
JACKSONVILLE FL 32225

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 DPT
NAME PRIVETT, PARK D., JR.
STREET ADDRESS 11449 LAUREL GREEN WAY NORTH
CITY-ST-ZIP JACKSONVILLE FL 32225 ☐ Delete

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

TITLE SV
NAME PRIVETT, DIANA G.
STREET ADDRESS 11449 LAUREL GREEN WAY NORTH
CITY-ST-ZIP JACKSONVILLE FL 32225 ☐ Delete

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

TITLE V
NAME JAMES, JOHN M.
STREET ADDRESS 16004 SHARK RD
CITY-ST-ZIP JACKSONVILLE FL 32226 ☐ Delete

TITLE
NAME
STREET ADDRESS 4865 Wild heron Way
CITY-ST-ZIP Jacksonville, FL 3225 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE Vice President
NAME Lee, Charles R.
STREET ADDRESS 2166 Rockdove Lane
CITY-ST-ZIP Fernandina Beach, FL 32034 ☐ 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Park D. PRIVETT, Jr.

3-27-01 (904) 743-7658

Date

Daytime Phone #

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90089 038 ***150.00

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DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)