

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K06689

1. Entity Name

MODERN BUSINESS ASSOCIATES V, INC.

FILED
Apr 21, 2000 8:00 am
Secretary of State

04-21-2000 90046 021 ***150.00

Principal Place of Business

101 PHILIPPE PARKWAY
SUITE 200
SAFETY HARBOR FL 34695
US

Mailing Address

101 PHILIPPE PARKWAY
SUITE 200
SAFETY HARBOR FL 34695-3661
US

00034000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

475 Central Avenue

3. Mailing Address

475 Central Avenue

Suite, Apt. #, etc.

Suite 100

Suite, Apt. #, etc.

Suite 100

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-2865066

Applied For

Not Applicable

Zip

33701

Country

USA

Zip

33701

Country

USA

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

MASCARA, ERNEST L P.A.
877 EXECUTIVE CENTER DRIVE
GLADES BUILDING, SUITE 303
ST. PETERSBURG FL 33702

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

4/11/00

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 ☐ Delete
NAME D
RICE, JACK S SR.
STREET ADDRESS 14261 LARK COURT
CITY-ST-ZIP CLEARWATER FL 33762

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

TITLE ☐ Delete
NAME D
RICE, JACK S JR.
STREET ADDRESS 3528 SHORELINE CIRCLE
CITY-ST-ZIP PALM HARBOR FL 34684

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

TITLE ☐ Delete
NAME D
MASCARA, ERNEST L
STREET ADDRESS 864 COLUMBUS DRIVE
CITY-ST-ZIP TIERRA VERDE FL 33715

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

TITLE ☐ Delete
NAME PD
LETTLEIR, MARK P
STREET ADDRESS 1539 DONEGAN ROAD
CITY-ST-ZIP LARGO FL 33771

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

TITLE ☐ Delete
NAME CEOC
CURCIO, AUGUST R
STREET ADDRESS 7000 BEACH PLAZA, STARLIGHT TOWER
CITY-ST-ZIP ST. PETE BEACH FL 33706

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

Date

727-814-4622

Daytime Phone #

CR2E034 (9/99)