

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90165 039 ***150.00

DOCUMENT # K56174

1. Entity Name
EARLE & KIEFNER, P.A.

Principal Place of Business

**ONE BEACH DRIVE S.E.
 SUITE 205
 SAINT PETERSBURG FL 33701
 US**

Mailing Address

**ONE BEACH DRIVE S.E.
 SUITE 205
 SAINT PETERSBURG FL 33701
 US**



2. Principal Place of Business

100-2nd Ave. So.

Suite, Apt. #, etc.

Suite-1201S

City & State
St. Petersburg, FL

Zip
33701

Country
USA

3. Mailing Address

100-2nd Ave. So.

Suite, Apt. #, etc.

Suite-1201S

City & State
St. Petersburg, FL

Zip
33701

Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2931250

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**FERGUSON, CHRISTOPHER C
 1 BEACH DRIVE SE
 STE 205
 ST. PETERSBURG FL 33701**

7. Name and Address of New Registered Agent

Name **James C. Rowe**
 Street Address (P.O. Box Number is Not Acceptable)
100-2nd Ave. So.
Suite-1201S
 City **St. Petersburg** **FL** Zip Code **33701**

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 *James C. Rowe*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/26/02

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, 2002 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

TITLE	DP	<input type="checkbox"/> Delete
NAME	FERGUSON, CHRISTOPHER C	
STREET ADDRESS	1 BEACH DR SE STE 205	
CITY-ST-ZIP	ST. PETERSBURG FL 33701	
TITLE	DST	<input type="checkbox"/> Delete
NAME	ROWE, JAMES C	
STREET ADDRESS	100 2ND AVE S 1201S	
CITY-ST-ZIP	ST PETERSBURG FL 33701	
TITLE	DV	<input type="checkbox"/> Delete
NAME	LURILLO, CAMILLE J	
STREET ADDRESS	4301 ANCHOR PLAZA PARKWAY, SUITE 300	
CITY-ST-ZIP	TAMPA FL 33634	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERGUSON, CHRISTOPHER C	
STREET ADDRESS	100-2nd Ave. So. - Suite 1201S	
CITY-ST-ZIP	ST. PETERSBURG, FL 33701	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LURILLO, CAMILLE J	
STREET ADDRESS	4301 ANCHOR PLAZA PARKWAY - SUITE 300	
CITY-ST-ZIP	TAMPA, FL 33634	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *James C. Rowe*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
James C. Rowe, Secretary

Date

Daytime Phone #

4/26/02 (727)823-5000

CR2E034 (9/01)