

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K82527

1. Entity Name

SEMBLER DEVELOPERS, INC.

**FILED**  
**Mar 17, 2000 8:00 am**  
**Secretary of State**

03-17-2000 90028 019 \*\*\*158.75

Principal Place of Business

Mailing Address

11300 4TH ST N  
SUITE 200  
ST PETERSBURG FL 33716  
US

P O BOX 22550  
5858 CENTRAL AVENUE  
ST. PETERSBURG FL 33742-2550  
US

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

59-2952389

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

SEMBLER, M. STEVEN  
11300 4TH ST N  
SUITE 200  
ST. PETERSBURG FL 33716

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, 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 DPT ☐ Delete  
NAME SEMBLER, M. STEVEN  
STREET ADDRESS 11300 4TH ST. N, SUITE 200  
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE S ☐ Delete  
NAME SEMBLER, M. STEVEN  
STREET ADDRESS 11300 4TH ST. N, STE 200  
CITY-ST-ZIP ST. PETERSBURG FL

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

TITLE V ☒ Delete  
NAME STROSS, PAMELA J.  
STREET ADDRESS 11300 4TH ST. N, STE 200  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE V ☐ Change ☒ Addition  
NAME Gaskin, Michael K.  
STREET ADDRESS 11300 4th St. N., Ste 200  
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE V ☐ Delete  
NAME JOHNSON, DARIAN W.  
STREET ADDRESS 11300 4TH ST. N, STE 200  
CITY-ST-ZIP ST. PETERSBURG FL

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

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:

*M. Steven Sembler*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M. Steven Sembler, President

3/14/00

(727) 577-5522

Date

Daytime Phone #

CR2E034 (9/99)