

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # K82527**

1. Entity Name

SEMBLER DEVELOPERS, INC.**FILED**
Mar 30, 2001 8:00 am
Secretary of State

03-30-2001 90331 036 ***158.75

0525195

Principal Place of Business

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

Mailing Address

P O BOX 22550
5858 CENTRAL AVENUE
ST. PETERSBURG FL 33742
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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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 SEMBLER, M. STEVEN ☐ Delete
STREET ADDRESS 11300 4TH ST. N, SUITE 200
CITY-ST-ZIP ST. PETERSBURG FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE S
NAME SEMBLER, M. STEVEN ☐ Delete
STREET ADDRESS 11300 4TH ST. N, STE 200
CITY-ST-ZIP ST. PETERSBURG FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE V
NAME GASKIN, MICHAEL K ☐ Delete
STREET ADDRESS 11300 4TH ST. N, STE 200
CITY-ST-ZIP SAINT PETERSBURG FL 33716TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE V
NAME JOHNSON, DARIAN W. ☐ Delete
STREET ADDRESS 11300 4TH ST. N, STE 200
CITY-ST-ZIP ST. PETERSBURG FLTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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
M. Steven Sembler, President

1/15/01

Date

(727) 577-5522

Daytime Phone #

CR2E034 (10/00)