

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 13, 2000 8:00 am
Secretary of State
 09-13-2000 90017 022 ***550.00

DOCUMENT # L19716

1. Entity Name
THE ADVISORY, INC.

Principal Place of Business

13575 58TH ST. NORTH
 SUITE 164
 CLEARWATER FL 33760
 US

Mailing Address

13575 58TH ST. NORTH
 SUITE 164
 CLEARWATER FL 33760
 US

2. Principal Place of Business

5770 ROOSEVELT BLVD.

3. Mailing Address

5770 ROOSEVELT BLVD.

Suite, Apt. #, etc.

STE 601

Suite, Apt. #, etc.

STE 601

City & State

CLEARWATER, FL

City & State

CLEARWATER, FL

Zip

33760

Country

US

Zip

33760

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2967889

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSEN, GEORGE L.
13575 58TH STREET NORTH
SUITE 164
CLEARWATER FL 34620

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

5770 ROOSEVELT BLVD.

STE 601

City

CLEARWATER

FL

Zip Code

33760

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	ROSEN, GEORGE L.	
STREET ADDRESS	13575 58TH ST., NORTH	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	KOTZ, RAYMOND	
STREET ADDRESS	13575 58TH STREET, NORTH	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DC	<input type="checkbox"/> Delete
NAME	FERGUSON, JAMES C.	
STREET ADDRESS	13575 58TH STREET, NORTH	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	SAVAGE, LEE B.	
STREET ADDRESS	13575 58TH STREET, NORTH	
CITY-ST-ZIP	CLEARWATER FL	
TITLE	DV	<input type="checkbox"/> Delete
NAME	HOUSER, JR. L	
STREET ADDRESS	13575 58TH STREET NORTH	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	5770 ROOSEVELT BLVD., STE 601
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	5770 ROOSEVELT BLVD., STE 601
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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NAME	
STREET ADDRESS	5770 ROOSEVELT BLVD., STE 601
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	5770 ROOSEVELT BLVD., STE 601
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:

JOHN M. HOUSER, JR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/11/00

Date

727-526-7800

Daytime Phone #

CR2E034 (5/00)