

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L56091

1. Entity Name

SHIRER & ASSOCIATES OF FLORIDA, INC.

Principal Place of Business

1301 10TH ST E  
SUITE B  
PALMETTO FL 34221  
US

Mailing Address

PO BOX 795  
ELLENTON FL 34222-0795  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

WEAR, JOE T JR  
1301 10TH ST EAST  
SUITE B  
PALMETTO FL 34221

4. FEI Number

59-2996788

Applied For  
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional  
Fee Required

7. Name and Address of New Registered Agent

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

TITLE PS  
NAME WEAR, JOE T. J  
STREET ADDRESS 1301 10 ST. EAST., STUIE B  
CITY-ST-ZIP PALMETTO FL 34221 ☒ Delete

TITLE T  
NAME WEAR, JOE T JR  
STREET ADDRESS 1301 10TH ST. E. STE. B  
CITY-ST-ZIP PALMETTO FL 34221 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P/S/T/D  
NAME WEAR, JOE T. JR  
STREET ADDRESS 1301 10th Street, East; Suite B  
CITY-ST-ZIP Palmetto, FL. 34221 ☒ Change ☐ Delete

TITLE VP/D  
NAME WEAR, VIVIEN A.  
STREET ADDRESS 1301 10th Street, East; Suite B  
CITY-ST-ZIP Palmetto, FL. 34221 ☐ Change ☒ Delete

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

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

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

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

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: Joe T. Wear Jr. Joe T. Wear Jr. 1-7-00 (941) 721-7215  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED  
Jan 14, 2000 8:00 am  
Secretary of State

01-14-2000 90066 032 \*\*\*158.75



DO NOT WRITE IN THIS SPACE