

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 01, 2002 8:00 am**  
**Secretary of State**

04-01-2002 90042 001 \*\*\*150.00

0096005  
AV

**DOCUMENT # M50849**

**1. Entity Name**  
**TAVISTOCK FINANCIAL CORPORATION**

**Principal Place of Business**  
**9901 LAKE NONA RD**  
**ORLANDO FL 32827**  
**US**

**Mailing Address**  
**200 SOUTH ORANGE AVE**  
**2300**  
**ORLANDO FL 32801**  
**US**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

**4. FEI Number** **59-2801133**

Applied For  
Not Applicable

Zip Country

Zip Country

**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**

**AGC CO**  
**200 S ORANGE AVE**  
**SUITE 2300**  
**ORLANDO FL 32801**

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, 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD THAKKAR, RASESH 9701 CHESTNUT RIDGE DR WINDERMERE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SILVERTON, VIVIANNE 9701 CHESTNUT RIDGE DR WINDERMERE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD VOSS, JEFFERSON R. 9701 CHESTNUT RIDGE DR WINDERMERE FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	9801 LAKE NONA RD ORLANDO, FL 32827	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	9801 LAKE NONA RD ORLANDO FL 32827	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	9801 LAKE NONA RD ORLANDO FL 32827	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Charles Lewis 9801 LAKE NONA RD ORLANDO FL 32827	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

**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:**

*Jefferson Voss*

3/13/02 (407) 876-8800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

*ATTACH DOC# M5089*  
*616000*

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BAKER  
&  
HOSTETLER LLP  
COUNSELLORS AT LAW

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200 SOUTH ORANGE AVENUE • SUNTRUST CENTER, SUITE 2300 • P.O. Box 112 • ORLANDO, FLORIDA 32802-0112 • (407) 649-4000  
FAX (407) 841-0168  
WRITER'S DIRECT DIAL NUMBER 649-4681

March 21, 2002

Annual Reports Filings  
Division of Corporations  
Post Office Box 1500  
Tallahassee, Florida 32302-1500

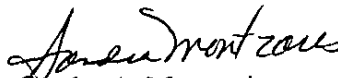
Re: 2002 Uniform Business Report for Tavistock Financial Corporation  
Document No. M50849

Dear Sir or Madam:

Enclosed please find the 2002 Profit Corporation Uniform Business Report for the above-referenced entity. Also enclosed is a check in the amount of \$150.00 to cover the cost of the filing fee.

If you have any questions regarding this matter, please do not hesitate to contact our office.

Very truly yours,



Sandra A. Mantzaris  
Legal Assistant, Corporate Maintenance

Enclosures

cc: Barbara A. Egolf, Esq. (w/o encs.)  
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