

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90036 021 ****61.25

DOCUMENT # N35824

1. Entity Name

THE TAMPA FORTY AND EIGHT CONVENTION CORPORATION

Principal Place of Business

2119 W. GRAY STREET
TAMPA FL 33606

Mailing Address

2119 W. GRAY STREET
TAMPA FL 33606

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

59-2996164

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

TAYLOR, J.G., JR.
2119 W. GRAY STREET
TAMPA FL 33607

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

FILE NOW:
FEE IS \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME HALL, DANIEL W., JR.
STREET ADDRESS 3914 OKLAHOMA AVE.
CITY-ST-ZIP TAMPA FL 33611 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE D
NAME SPRINGSTON, HERBERT R
STREET ADDRESS 4510 S GRADY AVE
CITY-ST-ZIP TAMPA FL 33611 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE SD
NAME DELONG, DAVID
STREET ADDRESS 4711 EL PRADO BLVD.
CITY-ST-ZIP TAMPA FL 33629 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE TD
NAME TAYLOR, J. G., JR.
STREET ADDRESS 16113 ARMISTEAD LN.
CITY-ST-ZIP ODESSA FL 33556-3304 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE VD
NAME LITTLE, RICHARD W
STREET ADDRESS 3713 ANCHOR DRIVE
CITY-ST-ZIP TAMPA FL 33611 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE D
NAME KERENS, JAMES E.
STREET ADDRESS 4406 W. JEAN ST.
CITY-ST-ZIP TAMPA FL 33614 ☐ DeleteTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

J.G. TAYLOR, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01

Date

813-920-6832

Daytime Phone #

CR2E037 (10/00)