

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000005803

1. Entity Name

PWFCID, INCORPORATED

Principal Place of Business

2666 SHANNON STREET  
ORANGE PARK FL 32965

Mailing Address

2666 SHANNON STREET  
ORANGE PARK FL 32965

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

TINNEY, MATTHEW JR  
1048 ENNISON ST  
GREEN COVE SPRINGS FL 32043

*[Signature]*

01 MAR 12 AM 9:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3290602

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

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME AWINE, PATRICK  
STREET ADDRESS 2624 SHOPRSBURG COURT  
CITY-ST-ZIP MIDDLEBURG FL

TITLE ST ☐ Delete  
NAME HAMPSHIRE, FELECIA  
STREET ADDRESS 508 FRANKLIN ST  
CITY-ST-ZIP GREEN COVE SPRINGS FL

TITLE C ☐ Delete  
NAME HENRY, MICHAEL  
STREET ADDRESS 703 MILL ST  
CITY-ST-ZIP GREEN COVE SPRINGS FL

TITLE T ☐ Delete  
NAME BATTLES, CHARLES  
STREET ADDRESS 407 PALM ST  
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE T ☒ Delete  
NAME DOUGLAS, FRED  
STREET ADDRESS PO BOX 742 N/A  
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

TITLE T ☐ Delete  
NAME HAMPSHIRE, CLARENCE  
STREET ADDRESS 508 FRANKLIN STREET  
CITY-ST-ZIP GREEN COVE SPRINGS FL 32043

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TREASURER ☐ Change ☒ Addition  
NAME TINNEY, MATTHEW JR  
STREET ADDRESS 1048 ENNISON ST  
CITY-ST-ZIP GREEN COVE SPRING FL 32043

TITLE PRESIDENT ☐ Change ☒ Addition  
NAME ROOSEVELT, PAIGE  
STREET ADDRESS 2666 SHANNON ST  
CITY-ST-ZIP ORANGE PARK FL 32065

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
500003924575--3  
-03/28/01--01098--025  
\*\*\*\*\*70.00 \*\*\*\*\*574.00

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

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-12-2001

Date

Daytime Phone #

CR2E037 (10/00)