2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 20, 2000 8:00 am Secretary of State DOCUMENT # **N94000000227** 1. Entity Name THE FLORIDA GULF COAST COMMERCIAL ASSOCIATION OF 04-20-2000 90088 026 ****61.25 Principal Place of Business Mailing Address 4319 EHRLICH RD 4319 EHRLICH RD TAMPA FL 33624-2201 TAMPA FL 33624 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3222190 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) KOSTROSKI, LOIS M 4319 EHRLICH RD TAMPA FL 33624 Zip Code City 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 DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change Delete TITLE TITLE CAPO, CRAIG NAME NAME STREET ADDRESS STREET ADDRESS ONE TAMPA CITY CENTER ST 1900 CITY-ST-7IP CITY-ST-ZIP **TAMPA FL 33702** ☐ Addition Change n ☐ Delete TITLE TITLE NAME ROBERTS, DON NAME STREET ADDRESS STREET ADDRESS 3507 SUNSTATE ST CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33634 Fisher Richard Prinacle Realty Management 2901 W. Busch Blvd. # 601 TITLE Delete TITLE Change Change Addition [NAME FISHER, RICHARD NAME STREET ADDRESS STREET ADDRESS 14502 N DALE MABRY STE 200 CITY-ST-ZIP CITY-ST-ZIP Tampa FL 33618 **TAMPA FL 33618** ☐ Addition TITLE Change TITLE □ Delete KOSTROSKI, LOIS NAME NAME STREET ADDRESS STREET ADDRESS 4319 EHRLICH RD CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33624** Áddition TITLE Edward O'Connell ☐ Change Delete TITLE Advantis 5810-H W. Cypiess St. NAME NAME STREET ADDRESS STREET ADDRESS Tampa, FL 33607 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP