

8/18

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 03, 2002 8:00 am
Secretary of State

08-18-2002 90140 044 ****61.75

DOCUMENT # N98000006743

1. Entity Name

ALLEN TEMPLE DEVELOPMENT CORPORATION OF YBOR CIT
Y

Principal Place of Business

2101 N. LOWE STREET
 TAMPA FL 33605

Mailing Address

2101 N. LOWE STREET
 TAMPA FL 33605

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **APPLIED FOR**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

STEWART, DELANO S ESQUIRE
1112 EAST KENNEDY BOULEVARD
TAMPA FL 33802

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/12/02
 DATE

After September 13, 2002,
 min. will be \$236.25.

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 ☒ Delete
 NAME **PD DAWKINS, HARRY L**
 STREET ADDRESS **12637 LONGCREST DRIVE**
 CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE ☐ Delete
 NAME **VD LEE, TRAVIS E**
 STREET ADDRESS **344 7TH AVENUE N**
 CITY-ST-ZIP **ST. PETERSBURG FL 33701**

TITLE ☒ Delete
 NAME **SD Coretha Larkins**
 STREET ADDRESS **PRATT, CELESTINE**
 CITY-ST-ZIP **3402 EAST GROVE STREET CIRCLE**
TAMPA FL 33610

TITLE ☐ Delete
 NAME **D HARVEY, HAZEL**
 STREET ADDRESS **4315 WEST GREEN STREET**
 CITY-ST-ZIP **TAMPA FL 33607**

TITLE ☐ Delete
 NAME **TD COLLIER, JANICE C**
 STREET ADDRESS **6101-112TH AVENUE**
 CITY-ST-ZIP **TEMPLE TERRACE FL 33617**

TITLE ☐ Delete
 NAME **D MOUNT, ZANNIE**
 STREET ADDRESS **933 GRAND CANYON DRIVE**
 CITY-ST-ZIP **VALRICO FL 33594**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
 NAME **PD COOK, WILLIE J**
 STREET ADDRESS **15277 NW 1st. St.**
 CITY-ST-ZIP **PEMBROKE PINES, FL 33028**

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

TITLE ☒ Change ☐ Addition
 NAME **SD LARKINS, CORETHA**
 STREET ADDRESS **4101 W. ARCH SE.**
 CITY-ST-ZIP **TAMPA, FL 33607**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/12/02
 Date

(813)225-1438
 Daytime Phone #

CR2E037 (4/02)



FEI #: 59-265-4662

Attachment

870637

#N98 000006763