

# 2000 UNIFORM BUSINESS REPORT (UBR)

STATE OF FLORIDA DEPARTMENT OF REVENUE

DOCUMENT # N99000006028

1. Entity Name

THE PROSSER HALLOCK TEKIE FOUNDATION, INC.

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

03-08-2000 90039 026 \*\*\*\*61.25

Principal Place of Business	Mailing Address
8101 PHILLIPS HWY.,STE.1 JACKSONVILLE FL 32256	8101 PHILLIPS HWY.,STE.1 JACKSONVILLE FL 32256-7457

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	Applied For
59-3603408	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
PROSSER, RICHARD C 8101 PHILLIPS HWY.,STE.1 JACKSONVILLE FL 32256

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
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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: Richard C. Prosser

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-00

Date

739-3655

Daytime Phone #

CR2E037 (9/99)