

2001 UNIFORM BUSINESS REPORT (UBR)

0024907

DOCUMENT # P00000016961

1. Entity Name

PENMD.COM, INC.

FILED

01 MAY -8 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

315 S. CALHOUN ST., STE. 600
TALLAHASSEE FL 32301

Mailing Address

315 S. CALHOUN ST., STE. 600
TALLAHASSEE FL 32301

2. Principal Place of Business

400 North Ashley DRIVE

Suite, Apt. #, etc.

Suite 2300

City & State

Tampa, FL

Zip

33602

Country

3. Mailing Address

400 North Ashley DRIVE

Suite, Apt. #, etc.

Suite 2300

City & State

Tampa, FL

Zip

33602

Country

4. FEI Number

59-3684372

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE.
MIAMI FL 33131

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.

(NOT

Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!
After MAY 1, 2001
Make Check Payable to Department of State

FEE IS \$150.00
Fee will be \$550.00
to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE Director/Chairman of the Board ☐ Delete
NAME Morris H. Miller
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

TITLE Director/President ☐ Delete
NAME Dale J. Anderson
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

TITLE Thomas G. Tinsley, Director ☐ Delete
NAME
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

TITLE Director ☐ Delete
NAME G. Ulmer Miller
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

TITLE Director/Treasurer ☐ Delete
NAME Thomas H. Dyer
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

TITLE Secretary ☐ Delete
NAME L. Kinder Cannon III
STREET ADDRESS 400 North Ashley Drive, Suite 2300
CITY-ST-ZIP Tampa, FL 33602

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 100004271341 - - 1
CITY-ST-ZIP -05/18/01--01083--019
*****150.00 *****150.00

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

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

13. 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 is required by Chapter 607, Florida Statutes, and that my name appears in Block 11 or Block 12 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

Date

Daytime Phone #

CR2E034 (10/00)