

2001 UNIFORM BUSINESS REPORT (UBR)

3

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-01-2001 90510 001 ***600.00

DOCUMENT # P00000080110

1. Entity Name
SPMC COMPANY



Principal Place of Business
**3901 COCONUT PALM DRIVE
SUITE 100
TAMPA FL 33619**

Mailing Address
**3901 COCONUT PALM DRIVE
SUITE 100
TAMPA FL 33619**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1034745

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HENDEE, BRETT ESQ.
100 S. ASHLEY DRIVE
SUITE 1770
TAMPA FL 33602**

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

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

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **Thayer Smith**
STREET ADDRESS
CITY-ST-ZIP

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

TITLE **S/T** ☐ Delete
NAME **BRUCE STAFFORD**
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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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 as 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

BRUCE STAFFORD

Date

2/17/01

Daytime Phone #

813-622-8895

CR2E034 (10/00)



DIAMOND

PRODUCTS
company

Value Through Partnership

Attachment Doc # P 00000080110
31548

March 13, 2001

SPMC Company
3901 Coconut Palm Drive
Suite 100
Tampa, FL 33619

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Document # P00000080110
SPMC Company

In response to your letter dated 3/5/01, attached is the list of officers and their addresses:

President 3901 Coconut Palm Drive, Suite 100, Tampa, FL 33619
Thayer Smith

S/T 3901 Coconut Palm Drive, Suite 100, Tampa, FL 33619
Bruce Stafford

If you need further information, please contact me at 813-622-8895 x 1205.

Sincerely,

Julie Rogers

Julie Rogers

Staff Accountant