

2003 FOR PROFIT CORPORATION UNIFORM-BUSINESS REPORT (UBR)

0136073 AT

FILED

03 SEP 10 AM 9:06

SECRETARY OF STATE
TALLAHASSEE FLORIDA



DOCUMENT # P00000091443

1. Entity Name
THE PHOENIX GROUP OF CENTRAL FLORIDA, INC.



Principal Place of Business
1416 MEADOWBROOK AVENUE
LAKELAND FL 33803

Mailing Address
PO BOX 90932
LAKELAND FL 33804

2. Principal Place of Business
5439 Kings Mont Dr.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Lakeland, Florida

City & State
Lakeland, Florida

Zip
33813

Country
Polk

4. FEI Number 59-3673305

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent
SANTONASTASO, ROBERT A JR.
1416 MEADOWBROOK AVENUE
LAKELAND FL 33803

7. Name and Address of New Registered Agent
Name: Santonastaso, Robert A Jr.
Street Address (P.O. Box Number is Not Acceptable): 5439 Kings Mont. Dr.
City: Lakeland FL Zip Code: 33813

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] Director, Robert A. Santonastaso, Jr. 9/6/03

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D	SANTONASTASO, ROBERT A JR.	<input type="checkbox"/> Delete
NAME		1416 MEADOWBROOK AVENUE	
STREET ADDRESS		LAKELAND FL 33803	
CITY-ST-ZIP			
TITLE	PST	UHL, LAURIE A	<input type="checkbox"/> Delete
NAME		1416 MEADOWBROOK AVENUE	
STREET ADDRESS		LAKELAND FL 33803	
CITY-ST-ZIP			
TITLE	V	SANTONASTASO, ERIC A	<input type="checkbox"/> Delete
NAME		1416 MEADOWBROOK AVENUE	
STREET ADDRESS		LAKELAND FL 33803	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	Santonastaso, Robert A Jr.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5439 Kings Mont Dr.	
STREET ADDRESS		Lakeland, FL 33813	
CITY-ST-ZIP			
TITLE	P.S.T.	Uhl, Laurie A.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5439 Kings Mont. Dr.	
STREET ADDRESS		Lakeland, FL 33813	
CITY-ST-ZIP			
TITLE	V	Santonastaso, Eric A	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5439 Kings Mont Dr.	
STREET ADDRESS		Lakeland, FL 33813	
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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 life empowered.

SIGNATURE: [Signature] Laurie A. Uhl, President 9/6/03 (863) 660-6605

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/03)