

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000102613

1. Entity Name

PARTNERCHECK, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90354 014 ***150.00

Principal Place of Business

12505 STARKEY ROAD
SUITE L
LARGO FL 33773

Mailing Address

C/O FIRST AMERICAN REAL ESTATE INFO SVCS.
150 2ND AVENUE NORTH - SUITE 1600
ST. PETERSBURG FL 33701

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

805 Executive Center Dr. W.

Suite, Apt. #, etc.

300

City & State

St. Petersburg, FL

Zip

33702

Country

USA

3. Mailing Address

805 Executive Center Dr. W.

Suite, Apt. #, etc.

300

City & State

St. Petersburg, FL

Zip

33702

Country

USA

4. FEI Number

59-3689962

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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 the filer, etc.

(NOTE: Registered Agent signature required when re-statuting)

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

| | |
|---|---------------------------------|
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Delete |
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | |
|---|--|
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| Secretary, VP Ken Chin 805 Executive Center Dr. W., #300 St. Petersburg, FL 33702 | |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| President, Director name: John W. Long 805 Executive Center Dr. W., #300 St. Petersburg, FL 33702 | |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| EVP, Director Bart Valdez 805 Executive Center Dr. W., #300 St. Petersburg, FL 33702 | |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| Vice President David Little 805 Executive Center Dr. W., #300 St. Petersburg, FL 33702 | |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| Treasurer Darrell Beaton 805 Executive Center Dr. W., #300 St. Petersburg, FL 33702 | |
| TITLE NAME STREET ADDRESS CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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

Ken J. Chin

April 23, 2001

Date

Daytime Phone #

CR2E034 (10/00)