

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2001 8:00 am
Secretary of State
 02-07-2001 90163 018 ***158.75

DOCUMENT # P00000104654

1. Entity Name
CORBY & COMPANY, INC.

Principal Place of Business Mailing Address
 2321 COSTA VERDE BOULEVARD 2321 COSTA VERDE BOULEVARD
 SUITE 202 SUITE 202
 JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250

2. Principal Place of Business 3. Mailing Address
25 SOUTH SECOND ST. **25 SOUTH SECOND ST.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
2ND FLOOR **2ND FLOOR**
 City & State City & State
JACKSONVILLE BEACH, FL **JACKSONVILLE BEACH, FL.**
 Zip Country Zip Country
32250 **USA** **32250** **USA**



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For
59-3680996 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
*** SPIEGEL & UTRERA, PA.**
343 ALMERIA AVENUE
CORAL GABLE, FL
33134
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

8. The above named entity submits this statement for:
 SIGNATURE _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. ☒ **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	PD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	PARKER, CATHERINE C		NAME		
STREET ADDRESS	2321 COSTA VERDE BOULEVARD SUITE 202		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP		
TITLE	VD	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	JOHNSON, GLENN G		NAME		
STREET ADDRESS	2321 COSTA VERDE BOULEVARD SUITE 202		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP		
TITLE	S	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	JOHNSON, ISABEL R		NAME		
STREET ADDRESS	2321 COSTA VERDE BOULEVARD SUITE 202		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP		
TITLE	T	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	PARKER, JAMES H		NAME		
STREET ADDRESS	2321 COSTA VERDE BOULEVARD SUITE 202		STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE BEACH FL 32250		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *Glenn Johnson* **Glenn Johnson VP 2/1/01 (904) 246-6885**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2034 (10/00)