

5/24/1

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Entity Name

P.m.H. Management & Marketing Services, Inc.

FILED**Jun 27, 2001 8:00 am**
Secretary of State

05-24-2001 90492 008 ***150.00

Principal Place of Business
304 Shore Dr. West
Oldsmar, FL 34677

Mailing Address
Same

Principal Place of Business
Suite, Apt. #, etc.

Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3679901**

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

Elizabeth A. Townes, CPA
13930 Clubhouse Circle
Tampa, FL 33624

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's signature required when submitting)

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-ST-ZIP	☐ Delete
Director	Patricia Horn	304 Shore Dr. W.	Oldsmar, FL 34677	☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☒ Addition
Sec. / Treasurer	Elizabeth Townes	13930 Clubhouse Circle	Tampa, FL 33624	☐	☒
Vice President	Louise Braumbaugh	6435 Arbor Dr.	New Port Richey, FL 34655	☐	☒
Director	Patricia M. Horn	304 Shore Dr. W.	Oldsmar, FL 34677	☒	☐
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition

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

Patricia Horn Patricia Horn

4/30/01 (813)855-5916

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CRED34 (11/00)