

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2002 8:00 am**  
**Secretary of State**

04-21-2002 90872 033 \*\*\*150.00

**DOCUMENT # P01000073622**

**1. Entity Name**  
**RANDY DENNIS DESIMONE, P.A.**

**Principal Place of Business**  
**14286-19 BEACH BLVD., PMB 142**  
**JACKSONVILLE FL 32250**

**Mailing Address**  
**14286-19 BEACH BLVD., PMB 142**  
**JACKSONVILLE FL 32250**

000100



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number**

**59-3735270**

Applied For

Not Applicable

Zip

Country

Zip

Country

**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**

**DESIMONE, RANDY D**

**201 9TH ST. N.**  
**JACKSONVILLE FL 32250**

Name

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

**234 DEER RUN DRIVE SOUTH**

**PONTE VEDRA BEACH**

**FL**

Zip Code

**32082**

**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** *Randy D. Desimone*  
 Signature, typed or printed name of registered agent and title if applicable.

**RANDY D. DESIMONE**  
**REGISTERED AGENT / PRESIDENT**

**2-8-01**  
 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, 2002 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** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**DPTS**  
**DESIMONE, RANDY DENNIS**  
**201 9TH STREET NORTH**  
**JACKSONVILLE BEACH FL 32250**

☒ Change ☐ Addition  
**234 DEER RUN DRIVE SOUTH**  
**PONTE VEDRA BEACH, FL 32082**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

☐ Change ☐ Addition

**TITLE** ☐ Delete  
**NAME**  
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**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)(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:** *Randy D. Desimone*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-8-01**  
 Date

**(904) 241-2533**  
 Daytime Phone #

CR2E034 (9/01)