

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 04, 2003 8:00 am**  
**Secretary of State**

08-04-2003 90142 013 \*\*\*150.00

0105934 AV

**DOCUMENT # P01000077136**

1. Entity Name  
**CYNTHIA B. HALL, P.A.**



Principal Place of Business  
**400 FIFTH AVE S STE 301  
NAPLES FL 34102**

Mailing Address  
**400 FIFTH AVE S STE 301  
NAPLES FL 34102**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3751645**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**HALL, CYNTHIA B  
400 FIFTH AVE S STE 301  
NAPLES FL 34102**

Name

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

City

**FL**

Zip Code

7. Name and Address of New Registered Agent

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DPT  
HALL, CYNTHIA B  
400 FIFTH AVE S STE 301  
NAPLES FL 34102** ☐ 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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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 like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**7/30/03**

CR2E034 (4/03)

Attachment

**SILVERIO & HALL**  
PROFESSIONAL ASSOCIATION

ATTORNEYS AT LAW

SUITE 2450 COURTHOUSE TOWER

44 WEST FLAGLER STREET

MIAMI, FLORIDA 33130

TELEPHONE (305) 371 - 2756

TELECOPIER (305) 372 - 2744

E-MAIL: miami@silveriohall.com

MARK V. SILVERIO

CYNTHIA BYRNE HALL

BOARD CERTIFIED MARITAL & FAMILY LAWYER

BRIAN M. SILVERIO

FRANCIS X. SEXTON, JR.

OF COUNSEL

E-MAIL: fsexton@silveriohall.com

10110626

#P01000077134

NAPLES OFFICE

400 FIFTH AVENUE SOUTH

SUITE 301

NAPLES, FLORIDA 34102

TELEPHONE (239) 649-1001

TELECOPIER (239) 649-1972

E-MAIL: naples@silveriohall.com

MIAMI DIRECT (239) 597-1665

PLEASE REPLY TO:

**Naples**

August 1, 2003

Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Re: Cynthia B. Hall

Dear Sirs:

Please be advised that I did not receive any earlier request to complete a Uniform Business Report. I received this request and have enclosed my filing fee of \$150.00. I am asking that any and all late charges or penalties be waived. I appreciate your consideration of this matter.

Yours very truly,

  
Cynthia Byrne Hall

CBH:klh  
Enclosure