

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90211 045 ***150.00

DOCUMENT # P02000110436

1. Entity Name
ACCENT TITLE OF FLORIDA, INC.



Principal Place of Business
**1000 CENTRAL AVE
ST PETERSBURG FL 33705**

Mailing Address
**1000 CENTRAL AVE
ST PETERSBURG FL 33705**



2. Principal Place of Business
**6251 Park Blvd
Suite, Apt. #, etc.
SUITE 8**

3. Mailing Address
**6251 Park Blvd
Suite, Apt. #, etc.
SUITE 8**

City & State
Pinellas Park, FL
Zip
33781
Country
USA

City & State
Pinellas Park, FL
Zip
33781
Country

4. FEI Number
37-1447024

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

**HOLLAND, WAYNE
6860 BURNING TREE DR
SEMINOLE FL 33777**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **D** ☐ Delete
NAME **HOLLAND, WAYNE**
STREET ADDRESS **6860 BURNING TREE DR**
CITY-ST-ZIP **SAEMINOLE FL 33777**

TITLE **D** ☐ Delete
NAME **WONSICK, DAVID**
STREET ADDRESS **9202 SILVERTHRON RD**
CITY-ST-ZIP **LARGO FL 33777**

TITLE **D** ☐ Delete
NAME **MARSHLACK, DANE**
STREET ADDRESS **902 BOCA CUEGA ISLE DR**
CITY-ST-ZIP **ST PETE BEACH FL 33706**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 another like empowered.

SIGNATURE: Wayne Holland, Pres 3-20-03 727-544-2444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)