## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # **P05282** May 15, 2000 8:00 am Secretary of State THE SARVIS GROUP, INC. 05-15-2000 90238 039 \*\*\*150.00 Principal Place of Business Mailing Address 6111 GAZEBO PARK PLACE NORTH 6111 GAZEBO PARK PLACE NORTH JACKSONVILLE FL 32257-1011 JACKSONVILLE FL 32257 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number City & State City & State 22-2026202 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SARVIS, RICHARD S. Street Address (P.O. Box Number is Not Acceptable) 6111 GAZEBO PARK JACKSONVILLE FL 32257 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE SARVIS, RICHARD S. NAME NAME STREET ADDRESS STREET ADDRESS 6111 GAZEBO PARK PLACE N CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE SARVIS, ROBERT L. NAME STREET ADDRESS 6111 GAZEBO PARK PLACE N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL - 🔲 • Change -- - 🗐 Addition -□ Delete -TITLE ZIEGLER, WILLIAM R. NAME STREET ADDRESS **522 FIFTH AVENUE** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** ☐ Addition ☐ Delete TITLE TITLE DUCLOS, MICHAEL S. NAME NAME STREET ADDRESS 6111 GAZEBO PARK PLACE N STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE, FK ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 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.