

# 2000 UNIFORM BUSINESS REPORT (UBR)

0012925

DOCUMENT # P32223

1. Entity Name

EQUITABLE JVS, INC.

FILED

00 MAR 10 PM 3:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

3424 PEACHTREE RD. NE  
SUITE 800  
ATLANTA GA 30326  
US

3424 PEACHTREE RD. NE  
SUITE 800  
ATLANTA GA 30326-2838  
US

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

59-1912708

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

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

City

700003172907--5

03/16/00 01030 000

\*\*\*\*150.00L\*\*\*\*150.00

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 signature required when reinstating)

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, 2000 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
HART, LINDA M  
3424 PEACHTREE RD, NE, STE 800  
ATLANTA GA 30326

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Asst. Sec.  
Debbie J. Newmark  
3424 Peachtree Rd., NE, Suite 800  
Atlanta, GA 30326

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
MCKEAN, THOMAS A  
3424 PEACHTREE RD, NE, STE 800  
ATLANTA GA 30326

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CPC  
KENNEDY, THOMAS P.  
3424 PEACHTREE RD, NE, STE 800  
ATLANTA GA 30326

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
CPCD  
Thomas P. Kennedy

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
JACOBSON, MICHAEL L  
3424 PEACHTREE RD, NE, STE 800  
ATLANTA GA 30326

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
vp  
Michael L. Jacobson

☒ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
ANTONIEWICZ, WALDEMAR J  
3424 PEACHTREE RD, NE, STE 800  
ATLANTA GA 30326

☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Director  
Jerrold Barag  
3424 Peachtree Rd., NE, Suite 800  
Atlanta, GA 30326

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Director  
Amber B. Degnan  
3424 Peachtree Rd., NE, Suite 800  
Atlanta, GA 30326

☐ 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:

Debbie J. Newmark

1/26/00

404-848-8600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)