

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P92000012336

FILED
Feb 12, 2002 8:00 AM
Secretary of State

Entity Name: CRISWELL BLIZZARD & BLOUIN, ARCHITECTS, INCORPORATED

Current Principal Place of Business:

ONE PROGRESS PLAZA
7TH FLOOR
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

500 EAST KENNEDY BOULEVARD
SUITE 300
TAMPA, FL 33602 US

Current Mailing Address:

ONE PROGRESS PLAZA
7TH FLOOR
ST. PETERSBURG, FL 33701 US

New Mailing Address:

500 EAST KENNEDY BOULEVARD
SUITE 300
TAMPA, FL 33602 US

FEI Number: 59-3156621

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLIZZARD, WILLIAM S
ONE PROGRESS PLAZA
7TH FLOOR
ST PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

BLIZZARD, WILLIAM S
500 EAST KENNEDY BOULEVARD
SUITE 300
TAMPA, FL 33602 US

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:

02/12/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLIZZARD, WILLIAM S
Address: 4503 W. SYLVAN RAMBLE STREET
City-St-Zip: TAMPA, FL 33609

Title: VD () Delete
Name: CRISWELL, WILLIAM N
Address: 2400 FEATHERSOUND DRIVE #321
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: ARROYO, LEANDRO A
Address: 3924 EMPERADO STREET
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: COCHRAN, JOHN R JR
Address: 4611 PLAYER COURT
City-St-Zip: TAMPA, FL 33624

Title: VD () Delete
Name: BLOUIN, JOSEPH E JR
Address: 4508 ROSEMERE BLVD.
City-St-Zip: TAMPA, FL 33609

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: GILSON, MICHAEL R
Address: 140 16TH AVENUE N.E.
City-St-Zip: ST. PETERSBURG, FL 33704

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM S. BLIZZARD

PD

02/12/2002

Electronic Signature of Signing Officer or Director

Date