

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000012350

1. Entity Name  
GARDINER AND GARDINER, P.A.

**FILED**  
**Jan 30, 2001 8:00 am**  
**Secretary of State**

01-30-2001 90145 047 \*\*\*150.00

Principal Place of Business

Mailing Address

~~1 E BROWARD BLVD.~~  
~~SUITE 1501~~  
~~FT. LAUDERDALE FL 33301~~  
~~US~~

~~1 EAST BROWARD BLVD.~~  
~~SUITE 1501~~  
~~FT. LAUDERDALE FL 33301~~  
~~US~~

2. Principal Place of Business

2708 NE 34 St.

3. Mailing Address

2708 NE 34 St

Suite, Apt. #, etc.

Ft Lauderdale FLA

Suite, Apt. #, etc.

Ft Land FLA

City & State

City & State

4. FEI Number 65-0376039

Applied For

Not Applicable

Zip 33306

Country BROWARD

Zip 33306

Country BROWARD

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

Name

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

2708 NE 34 St

Ft Land FLA

City

FL

Zip Code

33306

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, 2001 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 DPT  
NAME GARDINER, WILLIAM L. III  
STREET ADDRESS 1 E BROWARD BLVD, SUITE 1501  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2708 NE 34 St  
CITY-ST-ZIP Ft Land FLA 33306

TITLE DVPS  
NAME GARDINER, ANA I.  
STREET ADDRESS 1 E BROWARD BLVD, SUITE 1501  
CITY-ST-ZIP FT. LAUDERDALE FL ☐ Delete

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 2708 NE 34 St  
CITY-ST-ZIP Ft Land FLA 33306

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)