2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000013850

FILED
May 10, 2000 8:00 am
Secretary of State
05-10-2000 90121 039 ***150.00

1. Entity Name
JAMES, HOYER & NEWCOMER, P.A.

James, Hoyer, Newcomer,
4830 W. Kennedy Blvd., Suite 147
Tampa, Florida 33609

James, Hoyer, Newcomer,
4830 W. Kennedy Blvd., Suite 147
Tampa, Florida 33609

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
4830 W.KENNEDY BLVD		4830 W.KENNEDY BLVD	
Suite, Apt. #, etc. ONE URBAN CENTRE #147		Suite, Apt. #, etc. ONE URBAN CENTRE #147	
City & State TAMPA, FL		City & State TAMPA, FL	
Zip 33609	Country USA	Zip 33609	Country USA

4. FEI Number 59-3154550 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

John R. Newcomer, Jr.
4830 W. Kennedy Blvd., # 147
Tampa, Florida 33609

7. Name and Address of New Registered Agent

Name N/A
Street Address (P.O. Box Number is Not Acceptable) ONE URBAN CENTRE #147
4830 W.KENNEDY BLVD
City TAMPA, FL Zip 33609

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 ____

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

President/Director
John R. Newcomer, Jr.
4830 W. Kennedy Blvd. # 147
Tampa, Florida 33609

Secretary/Director
W. Christian Hoyer
4830 W.Kennedy Blvd., # 147
Tampa, Florida 33609

Treasurer/Director
Judy S. Hoyer
4830 W. Kennedy Blvd., #147
Tampa, Florida 33609

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

13. [illegible] the information supplied [illegible] does not qualify for the exemption stated in Section [illegible] Florida Statutes [illegible] supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath [illegible] receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes [illegible] with an address, with all other like empowered.

SIGNATURE: W.Christian Hoyer Secretary 4-28-2000